

# SUMMER PROGRAM 2008 APPLICATION FOR ADMISSION

**Leapfrog** For fast, easy and secure service, please consider applying online at [www.ctd.northwestern.edu](http://www.ctd.northwestern.edu).

Please check the location for which you are applying:  Evanston  Glen Ellyn  All-Day (grade 3 only)

**Applicant Information** Please type or print. You may photocopy this application for family or friends.

Applicant's Name

|  |                       |        |      |
|--|-----------------------|--------|------|
| DATE OF BIRTH  | FIRST                 | MIDDLE | LAST |
| Gender <input type="checkbox"/> Male <input type="checkbox"/> Female | 2007-2008 Grade Level |        |      |

Billing/Home Address

BOX/ROUTE OR NUMBER AND STREET

|      |                  |     |         |
|------|------------------|-----|---------|
| CITY | STATE (PROVINCE) | ZIP | COUNTRY |
|------|------------------|-----|---------|

|                |         |
|----------------|---------|
| Home Phone ( ) | Fax ( ) |
|----------------|---------|

Student's (or Parent's) E-mail Address

Check here to receive acceptance packet and program materials via e-mail

T-Shirt Size (students receive a program t-shirt):

- Child Small  Child Medium  Child Large  
 Adult Small  Adult Medium  Adult Large

Race/Ethnicity (optional):  Caucasian

- African-American  Other  Native Alaskan/Native American  
 Hispanic  Multiracial  Asian/Pacific Islander

Please include my family's name and contact information on the carpool list that will be distributed to families requesting carpool information.

## Contact Information

Parent/Guardian 1 Name  Dr.  Mrs.  Ms.  Mr.

|               |                   |                |        |
|---------------|-------------------|----------------|--------|
| Day Phone ( ) | Evening Phone ( ) | Cell Phone ( ) | E-mail |
|---------------|-------------------|----------------|--------|

Occupation

Employer

Parent/Guardian 2 Name  Dr.  Mrs.  Ms.  Mr.

|               |                   |                |        |
|---------------|-------------------|----------------|--------|
| Day Phone ( ) | Evening Phone ( ) | Cell Phone ( ) | E-mail |
|---------------|-------------------|----------------|--------|

Occupation

Employer

Emergency Contact (must be someone other than parent) *Emergency contact is required.*

|           |       |                |              |
|-----------|-------|----------------|--------------|
| NAME      | FIRST | LAST           | RELATIONSHIP |
| Phone ( ) |       | Cell Phone ( ) |              |

**Application Method** For details, see page 11.  Returning Student  New Student  Admission Portfolio

Are you applying for financial aid?  Yes  No *If yes, you must enclose a completed Financial Aid Application (page 47).*

**Application Checklist** *Incomplete applications will not be processed. After May 15, incomplete applications are deemed inactive.*

### Returning Students\*

\*REFER TO PAGE 10 TO CONFIRM ELIGIBILITY.

- Successful previous CTD participation  
 Completed application  
 Course payment  
 Late fee if applying after May 15, 2008

### New Students or New Scores

- Nationally normed test scores or CTD evaluation (please attach)  
 Completed application  
 Course payment  
 Late fee if applying after May 15, 2008

### Admission Portfolio (grades 2 & 3 only)

- 2 Teacher recommendations (pages 45)  
 Current report card  
 State test scores if available  
 Completed application  
 Course payment  
 Late fee if applying after May 15, 2008

**Course Choice(s)** Please indicate how many weeks you are applying for:  one week  two weeks  three weeks

Please indicate your course choices for the weeks you wish to attend. If you plan on attending more than one course, you must send in the \$235 tuition payment for each week-long course (\$475 for the All-Day option). Only one \$50 application fee is needed per student.

|                     | MORNING COURSES |        |        | AFTERNOON COURSES |        |        | ALL-DAY OPTION                     |        |        |
|---------------------|-----------------|--------|--------|-------------------|--------|--------|------------------------------------|--------|--------|
|                     | Week 1          | Week 2 | Week 3 | Week 1            | Week 2 | Week 3 | Week 1                             | Week 2 | Week 3 |
| 1st choice course # |                 |        |        |                   |        |        |                                    |        |        |
| 2nd choice course # |                 |        |        |                   |        |        |                                    |        |        |
| 3rd choice course # |                 |        |        |                   |        |        | (no 3rd choice for All-Day option) |        |        |

*continued on next page*

# SUMMER PROGRAM 2008 APPLICATION FOR ADMISSION continued

## Leapfrog

### School Information

Name of School Attended in 2007–2008 \_\_\_\_\_

School Mailing Address \_\_\_\_\_

BOX/ROUTE OR NUMBER AND STREET

CITY

STATE

ZIP

School Phone (      ) \_\_\_\_\_

School Fax (      ) \_\_\_\_\_

### Certification/Releases

We have read the Summer Program brochure and fully understand the nature of the program, admission criteria, refund and financial aid policies. We agree to abide by the rules and policies stated in this brochure, in the family handbook and established during the session by the staff. As a parent/guardian, I give permission for my child to participate in the Summer Program and attend any staff-supervised field trips. As a student, I give CTD representatives permission to contact my parent(s), guardian(s) and/or emergency contact(s) to discuss academic, health, administrative or disciplinary matters related to my enrollment in the program. The signatures below also grant Northwestern University the right to reproduce the student's image, likeness or work in publications or other media. I will make no monetary or other claim against Northwestern for such use. We certify that all statements and materials presented in the application are correct and complete, and agree that the deliberate submission of inaccurate, incomplete or misleading statements or materials constitutes grounds for revocation of admission or dismissal from the program.

\_\_\_\_\_  
SIGNATURE OF PARENT OR LEGAL GUARDIAN

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF STUDENT

\_\_\_\_\_  
DATE

### Family Conference

My family will participate in the "Opportunities for the Future" conference, June 28, 2008, at Northwestern University, Evanston, Illinois.  
# \_\_\_\_ Adults # \_\_\_\_ 4th–12th graders # \_\_\_\_ PreK–3rd graders *Additional \$100 fee for families. For more information, please see page 49.*

### Course Costs

An application fee of \$50 and the tuition deposit of \$235 per course (\$475 per grade 3 All-Day course) must be submitted with the application. For applications postmarked after May 15, 2008, a late fee of \$50 must be included. Financial aid applicants should submit the \$50 application fee and a \$50 tuition deposit. Make check or money order payable to Center for Talent Development. **Please write the name of the applicant on the check or money order.**

### Program Information

Have you participated in a previous CTD program?  Yes  No

If so, which of the following:  Summer  Saturday Enrichment Program  Gifted LearningLinks

How did you *first* hear about Center for Talent Development?

- |   |   |
|---|---|
| <input type="checkbox"/> Received catalog/postcard mailed at home               | <input type="checkbox"/> Advertisement in _____                                 |
| <input type="checkbox"/> Fair/conference/school presentation                    | <input type="checkbox"/> Word-of-mouth referral (friends, relatives, etc.)      |
| <input type="checkbox"/> Flyer sent home from school with student               | <input type="checkbox"/> Received e-mail <input type="checkbox"/> Listserv      |
| <input type="checkbox"/> School personnel (teacher, school counselor, etc.)     | <input type="checkbox"/> Northwestern University campus mailing                 |
| <input type="checkbox"/> Web search (I was looking for: _____)                  | <input type="checkbox"/> Link from another Web site, e.g., NAGC, Hoagies: _____ |
| <input type="checkbox"/> Other Talent Search Centers, e.g., Duke, Johns Hopkins | <input type="checkbox"/> Other (please be specific) _____                       |



**SCHOLARSHIP FUND**

- Yes, I would like to help another child participate in a Center for Talent Development program by making a tax-deductible donation to the CTD Scholarship Fund in the amount of \$ \_\_\_\_\_  
Checks should be made payable to Center for Talent Development Scholarship Fund.
- An additional check or money order is enclosed to cover my donation.

**Mail completed application to:** Summer Program, Center for Talent Development, 617 Dartmouth Place, Evanston, IL 60208-4175.

### For Office Use Only

REC'D \_\_\_\_\_ CK# \_\_\_\_\_ CK DATE \_\_\_\_\_ CK AMT \$ \_\_\_\_\_ ADM \_\_\_\_\_ DENY \_\_\_\_\_ COURSE# \_\_\_\_\_