

Photon Camp 2020 Application

The following documents are required:

- Student Application with Personal Statement
- Letter of Recommendation
- Permissions/Liability Form
- Transcript

Applications are due no later than 5PM May 22, 2020. If you have any questions about the content of this application, you may contact Dustin Newman, The Institute of Optics Photon Camp Administrator, at dustin.newman@rochester.edu or (585) 275-7764.

Student Information:

Student First Name:

Middle:

Last:

Date of Birth:

Email:

Name of High School and year of expected graduation:

Home Address:

City:

State:

Zip:

Are you a U.S. Citizen?

(Info required in order to visit the Laboratory for Laser Energetics)

Do you have any severe allergies or significant health concerns?

Do you have any special needs (i.e. dietary)?

How will you be traveling to/from campus each day?

(Camp is usually held between 9am-5pm)

Camp participants will receive a T-shirt. Please specify adult T-shirt size:

S M L XL

Parent/Guardian Information (1):

Name:

Phone:

Mobile:

Email:

Parent/Guardian Information (2):

Name:

Phone:

Mobile:

Email:

Alternate Emergency Contact: (In the event we cannot reach parent/guardian)

Name:

Phone:

Academic Background:

Have you completed physics? Yes No In-progress

Have you completed calculus or pre-calculus? Yes No In-progress

Note: A copy of your transcript must be submitted along with this application

Personal Statement:

Please attach a personal statement of approximately 300 words or less describing your interests and future ambitions.

Certification:

I certify that the information contained in this application is accurate and complete to the best of my ability.

Student Signature and Date

Permissions/Liability Information: The Institute of Optics Photon Camp 2019

Statement of Risk and Liability, Certificate of Health, Emergency Waiver, Field Trips, and Publicity.

In consideration for allowing (student name) _____ to participate in The Institute of Optics Photon Camp, I, as his/her parent/guardian represent and affirm to the University of Rochester that:

I understand that participating in any activity involves a risk of injury or harm.

All such risks are being assumed knowingly and voluntarily, including but not limited to those associated with travel to and from the program. I certify that my child is in good health and has no physical condition that would prevent him/her from participating in the program.

In the event of the program's inability to locate me, or the emergency contact designee, I give permission to program authorities to take such emergency measures as they deem appropriate until the emergency contact designee or I can be contacted.

I will not hold the University of Rochester, its employees, and agents responsible for any injury or other harm that results from program participation.

I understand that participation includes attendance at all sessions of the required activities outlined in the program descriptions, and I further understand that that may include participation in field trips and other activities away from the campus site. I give permission for my student to attend these functions and to be transported by program-approved transportation, unless I give written withdrawal of permission from a specific event.

Students may have opportunities to speak about their experiences in the program to the media during classes and presentations. I give permission for the use of any photos, movies, audio, or video tapings of my child's activities at the University of Rochester.

The material so obtained may be used for educational purposes or for publicity benefiting education.

Code of Conduct and Discipline

Students in The Institute of Optics Photon Camp engage in a challenging academic experience as active participants in the learning process. In order to ensure that The Institute of Optics Photon Camp can be fully dedicated to their academic and educational mission, students are expected to adhere to the University of Rochester's Code of Conduct. Students are expected to adhere to these guidelines, and disregard may result in dismissal from the program.

Respect for Others:

The University of Rochester community consists of people with diverse backgrounds and beliefs. The University of Rochester welcomes students in a wide variety of programs, including high school students in academic and athletic programs, collegiate students pursuing undergraduate and graduate degrees, and students enrolled in a variety of workshops. Every effort is made to provide for the needs of all our students.

Conduct that is disrespectful or demeaning of the rights of others, including but not limited to verbal, physical, or sexual harassment, will not be tolerated and may result in disciplinary action, including possible dismissal from the program. Students are expected to be respectful of all faculty, staff, students, and visitors on campus, both in and out of the classroom.

Cell Phone Use:

While students may carry their cell phones, the phones should remain off during class time and should not be visible to instructors. We reserve the right to take the phone if a student is asked to put it away and refuses. The cell phone will be returned to the student at the end of class.

Illegal Substances:

Possession, use, distribution, or being in the presence of alcohol and illegal drugs is not permitted, and will result in immediate dismissal from the program.

Smoking:

The University of Rochester mandates a smoke-free environment.

Weapons:

Dangerous weapons (firearms, explosive materials, knives, etc.) are strictly prohibited. If a weapon is found, it will be confiscated and an investigation will be conducted.

Disorderly Conduct:

Tampering with fire or emergency equipment or failure to comply with a reasonable request from University of Rochester officials acting in performance of their duties are all contrary to University of Rochester regulations. Failure to abide by these policies and procedures may result in disciplinary action, which may include: a warning, consultation with parents, or dismissal from the program.

Your signature below indicates that you and your parent/guardian have read and understand the terms and policies listed above and agree to abide by them.

Student Name

Student Signature

Date

Parent/Guardian Name

Parent/Guardian Signature

Date



Video and Photograph Release

Date: _____

I hereby consent to be videotaped and/or photographed by the staff of Institute of Optics.

I understand that the videos/photos may be used on the Institute of Optics websites and YouTube channel and/or publicity purposes at the discretion of The Institute.

Signature of subject: _____

Signature of parent/guardian: _____

(Required for subjects who are under 18 years of age)

Address: _____

Signature of witness: _____