

**Johns Hopkins Montgomery County
PHONE & GAMES APPLICATION FORM
July 24-28, 2017**

Please include the following information. Applications will not be reviewed until complete.

Completed Application Form
Copy of most recent Report Card
Teacher Recommendation Form
150 – Word Essay in response to the prompt:

Explain why you want to participate in the Phone & Games program

Applicant Information

The information you provide will be used to communicate with you during the application process. Please type or write clearly.

Applicant Name: _____ Gender: ____ Male ____ Female
Address: _____
City: _____ State: _____ Zip: _____
Home Phone: _____ Cell Phone: _____
Email: _____
Birth Date: _____ Current Grade: _____

* Do you have access to an Android phone to use during the program? Yes No

* Do you have internet access at home? Yes No * Do you have a Google account? Yes No
*(*not required for participation)*

Ethnicity (Optional): Are you Hispanic/Latino? Yes, Hispanic or Latino (including Spain) No

What is your racial origin? (Optional - Choose one or more of the following)

- American Indian or Alaska Native Asian White Black or African American
 Native Hawaiian or other Pacific Islander Other

School Information

School Name: _____ School Phone: _____

School Address: _____

Type of School: Public Private Home School

Name of teacher completing the recommendation form: _____

Teacher email address: _____

APPLICATION CONTINUES ON REVERSE

Parent/Guardian Information

The information you provide will be used to communicate with you. Please type or write clearly.

Name of Parent/Guardian 1 (please print) _____

Cell Phone: _____ Email: _____

Check this box if the address is the same as the student

Parent/Guardian 1 Address (if different from student) _____

City: _____ State: _____ Zip: _____

Home Phone: _____

Name of Parent/Guardian 2 (please print) _____

Cell Phone: _____ Email: _____

Check this box if the address is the same as Parent/Guardian 1

Parent/Guardian 2 Address (If different from Parent/Guardian 1):

City: _____ State: _____ Zip: _____

Home Phone: _____

Is anyone in your family a JHU alum, currently attending JHU or a member of JHU staff? Yes No

Relationship to student: _____

Essay

Essays may be typed or handwritten and provided on a separate piece of paper

In 150 words, explain why you want to participate in the Phone & Games program.

Parent/Guardian/Student Agreement

I approve of this application and will permit _____ to attend the Phone & Games week offered by Johns Hopkins University at the JHU Montgomery County Campus at 9601 Medical Center Drive, Rockville, MD 20850. The cost for the one-week session is \$500.00

Student Signature: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____

Please return all completed application materials to:

Barbara Crews, Johns Hopkins University, 9601 Medical Center Drive, Rockville, MD 20850 or bcrews@jhu.edu

TEACHER RECOMMENDATION FORM

Thank you for completing this recommendation for your student. This form gives us an idea of the student's strengths and weaknesses. Once completed, please scan and email to bcrews@jhu.edu; fax to 301-294-7110; or mail to PHONE & GAMES, ATTN: Barbara Crews, Johns Hopkins Montgomery County Campus, 9601 Medical Center Drive, Rockville, MD 20850.

Student's Name:

Teacher name:

Teacher email:

Subject(s) Taught to Student:

Other Subject(s) Taught:

Teacher Signature:

On a scale of 1 to 10 (1 being the lowest), rank your student on the following qualities and include an explanation of your score.

Student's science and/or math aptitude (please rank and explain):

Student's motivation and maturity (please rank and explain):

Student's ability to tackle new material independently (please rank and explain):

Student's ability to collaborate in a team environment (please rank and explain):

Please describe one quality that you feel this student needs to improvement: