

Wright State University
2009 Summer Academic Enrichment Program
Application

Please print legibly in dark ink, or type.

Course _____ Week of _____ Cost _____

Participant Information

Name _____ Gender _____

Address _____

City _____ State _____ Zip _____

County _____ Home phone (_____) _____ - _____

Date of birth ____/____/____ Grade level (as of 9/2009) _____

E-mail address _____

Father's name _____ Work phone (_____) _____ - _____

Mother's name _____ Work phone (_____) _____ - _____

Optional Ethnicity(Caucasian, African American, Hispanic, Asian, Native American, Asian Indian, Other) _____

I have ___ / have not ___ attended a Pre-College Program at Wright State University.

SCHOOL INFORMATION

Name of School _____ Telephone (_____) _____ - _____

Address _____

City _____ State _____ Zip _____

School District _____

Extracurricular activities/awards _____

METHOD OF PAYMENT (All applications must be submitted with the \$75 application fee, per course. The application fee will be credited toward the total cost of the course.)

Personal check number _____ Amount _____ Date _____

(Make checks payable to Wright State University)

_____ MasterCard _____ VISA _____ Discover Amount \$ _____

Card Number _____ Expiration date _____

Name of card holder _____

Return application materials along with the application fee to:

Office of Pre-College Programs
Wright State University
3640 Colonel Glenn Hwy.
Dayton, OH 45435-0001

Phone (937) 775-3135
Fax (937) 775-4883

WRIGHT STATE UNIVERSITY
2009 SUMMER ENRICHMENT PROGRAM
SCHOOL NOMINATION

Required for all programs

The Office of Pre-College Programs at Wright State University offers intensive summer academic enrichment programs for students entering grades 6 – 12. Students who appreciate the opportunity for personal growth, enjoy a challenge and have the motivation to succeed are encouraged to apply. Your candid assessment of this student's academic and interpersonal capabilities is an integral part of the selection process.

Name of student _____

Describe this student's academic/intellectual abilities:

Describe this student's interpersonal abilities:

How do you feel this student could benefit from this academic enrichment experience?

Securely attach additional pages as needed.

Signature of person completing form _____

Position/Title _____

Complete mailing address _____

Work phone (_____) _____ - _____ E-mail address _____

Email questions or comments to: precollege@wright.edu