

2017 University of Missouri Summer Transportation Institute Application Form

July 10th-14th, 2017 or July 17th-21st, 2017

STUDENT INFORMATION (Please make sure handwriting is legible, or type)

Last Name:		First Name:		M.I.
Address: (Street Name, Apt. #, City, State, Zip code)			Birth Date: (Mo./Yr.)	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race (Optional):	How did you hear about MU Summer Transportation Institute: <input type="checkbox"/> Friend <input type="checkbox"/> Parent <input type="checkbox"/> Teacher/School <input type="checkbox"/> Other (please list):		
Grade in Spring 2017: <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11	Name of School (Spring 2017):		Grade Point Average (4.0 scale):	
I have completed algebra, or will be qualified for enrollment in algebra, for the coming school term. <input type="checkbox"/> Yes <input type="checkbox"/> No				
<p>The institute is offered over two, one-week sessions. The content of both sessions is similar. Please rank your preference:</p> <input type="checkbox"/> My first preference is week of July 10th -14th, 2017 and my second preference is week of July 17th - 21st, 2017. <input type="checkbox"/> My first preference is week of July 17th -21 st , 2017 and my second preference is week of July 10th -14th, 2017. <input type="checkbox"/> My only preference is week of July 10th- 14th, 2017. I am not available to attend week of July 17th – 21st, 2017. <input type="checkbox"/> My only preference is week of July 17th- 21st, 2017. I am not available to attend week of July 10th – 14th, 2017. <input type="checkbox"/> I do not have a preference.				
Please list your math and science classes: (most recent)				
Math:		Science:		
Accommodations (Optional): Please identify any accommodations that you might need to support your participation (e.g. Braille, Interpreting Service, accessible transportation, additional personal support, and special diet)				

PARENT/GUARDIAN INFORMATION

Parent/Guardian Name:		Parent/Guardian Address (if different): (Street Name, Apt. #, City, State, Zip code)		
Home Phone:	Work Phone:	Cell Phone:	Parent Email Address:	

I certify that the information I have provided on this application form is accurate.

Student Signature:	Parent/Guardian Signature:	Date:
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To apply for University of Missouri Summer Transportation Institute, you must submit:

1. A completed application form.
2. A **typed essay** at least 350 words: Describe your career interests and how the University of Missouri Summer Transportation Institute can assist you in reaching your goals.
3. A letter of recommendation. Letter must be from someone familiar with your academic performance, character, career aspirations, or community service and include how long the writer has known you. May include, but not limited to a guidance counselor, teacher, principal, coach, church leader, or employer. The letter may reflect your scholarly activities, conduct, attitude, ability to work as a member of a team, and so on.

APPLICATION DEADLINE: June 24, 2017. Incomplete applications will not be processed.
Please note submission of an application does not guarantee a place at 2017 Summer Transportation Institute
Please submit application, essay and letter of recommendation by mail to:
 Mr. Henry Brown
 University of Missouri
 Department of Civil and Environmental Engineering
 E2509 Lafferre Hall
 Columbia, MO 65211
Or submit your application, and essay online via email to brownhen@missouri.edu and submit letter of recommendation by mail.
 For further information, contact Henry Brown at (573) 882-0832 or by e-mail at brownhen@missouri.edu