

Financial Awareness Means Equity (FAME)



California State University, Stanislaus
Office of Mathematics Grants
Email: mathgrants@csustan.edu

Affix a wallet size Photograph

I. Summer 2011 Registration Form

Monday thru Thursday, June 20 – June 30, 2011
9:00 AM to 3:00 PM

- Please print clearly using **BLACK** or **BLUE ink pen**.
- Both parent and student signatures and picture are required for a completed application.

Student Name: _____ Gender: F M

Parent/Guardian (Name): _____

Mailing Address: _____
Street

City State ZIP

Home Phone: _____ Emergency or Cell Phone: _____

E-mail Address: _____
please print clearly

Current Grade Level: _____ Grade Level as of Fall 2011 _____

School Name and City: _____

Principal Name (please print) _____

T-shirt Adult Size: S M L XL XXL XXXL

II. Student's Personal Statement (Must be included with application)

On a separate sheet of paper AND in your own handwriting with black ink, write an essay on **one** of the following (at least 200 words). Illegible essays will **not** be read.

- Why do you want to participate in FAME?
- Let us know what you think can be done to make your school a safer place for all students.
- Let us know how can technology be used in the classroom to help you learn better.

III. To Be Completed by Parent/Guardian

Indicate names and telephone numbers of two adults who may be contacted about your daughter's performance in school, social and family setting. (Required)

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Relationship</u>
1. _____	_____	_____	_____
2. _____	_____	_____	_____

- (Student's name) _____ has my permission for participation in the FAME Academy offered through CSU, Stanislaus. I give permission to authorized personnel to make a record of my child's activities (e.g. video-tape, audio-tape, photos, and comments) while engaged in the program. I understand that the material so obtained may be used for publicity, education, and other training purposes benefiting the program.
- I understand that my child must abide by the dress code in order to participate in the program.
- I understand that my child will be dismissed if she breaches any of the rules.
- I assume full responsibility for any damage to the University property brought about by my child.
- Parent/Guardian Signature: _____ Date: _____

As a participant of FAME Academy 2011, I will abide by the rules.

Student Signature: _____ **Date:** _____
(Required)

IV. Registration Procedure

- **FREE** if completed application received **BY June 10, 2011**.
- **AFTER June 10, 2011**, application fee will be **\$100.00**.

Make check/money order payable to "CSU Stanislaus/FAME 2011".

Mail the completed application form and payment to: *
CSU Stanislaus/Math Grants
ATTN: Dr. Viji Sundar
One University Circle
Turlock, CA 95382

***Only cash, checks or money orders accepted – NO credit card**