



D2D Summer Program Application

Applicant's Name: _____

School: _____ Entering Grade: _____

DOB: ____/____/____ Gender: Female/Male Ethnicity: _____

School Grades: Mostly A's/Mostly B's/Mostly C's/Mostly D's/Mostly F's

<i>OFFICE USE ONLY</i>	
App#	_____
Gr:	<input type="checkbox"/> E: <input type="checkbox"/>
1:	<input type="checkbox"/> 2: <input type="checkbox"/> 3: <input type="checkbox"/>
D\$:	_____
\$\$:	_____

Parent's Emergency Contact Information

Guardian's Name #1: _____

Cell Phone#: _____ Phone #2: _____ Email: _____

Place of Work: _____ Work #: _____

Guardian's Name #2: _____

Cell Phone#: _____ Phone #2: _____ Email: _____

Place of Work: _____ Work #: _____

Emergency Contacts

Name	Relation To Child	Phone #1	Phone #2

Annual Income: \$_____ Number of Household Members: _____ Child lives with: _____

Medical Information

Medical Insurance for child? Yes/No | Allergies: _____

Insurance Company: _____ Policy #: _____

Family Doctor name: _____ Phone #: _____

Is there anything you would like to disclose about yourself before we move forward?



D2D Summer Program Application Continued...

Short Answer Questions:

Please answer the following questions in 3 – 5 sentences. If you feel you need more space, please use the back.

1. Choose one quotation that defines who you are and explain why that quotation describes you so well.

2. Describe a problem you've solved or a problem you'd like to solve. It can be an intellectual challenge, a research query, an ethical dilemma - anything that is of personal importance, no matter the scale. Explain its significance to you and what steps you took or could be taken to identify a solution.

3. The lessons we take from *obstacles we encounter* can be fundamental to later success. Recount a time when you faced a *challenge, setback, or failure*. How did it affect you, and what did you learn from the experience?
