

Society of Hispanic Professional Engineers  
March 2010



# AHETEMS

AHETEMS SUMMER CAMP @ UT-Arlington

## PROGRAM INFORMATION AND REGISTRATION



### **AHETEMS, Inc.**

The University of Texas at Arlington

Box 19019

Arlington, TX 76019

(817) 272-1116

[www.ahetems.org](http://www.ahetems.org)

[ahetems@shpe.org](mailto:ahetems@shpe.org)

## 2010 AHETEMS Summer Camp

### OVERVIEW

The AHETEMS Summer Camp is a four-day residential program intended to uniquely motivate, encourage and inform **incoming 10<sup>th</sup> grade Hispanic high school students** about the educational and career opportunities in math, science, and engineering. Hosted at the University of Texas at Arlington, summer camp participants will reside in the university residence halls to fully partake in the living-learning experience. Participants will attend college prep and career workshops, tour the university, engineering facilities and science labs conducting state-of-the-art research, conduct some exciting engineering and science activities and experiments, and participate in some mind-challenging mini-competitions for prizes and awards presented at the Awards Luncheon. On the last day of the camp, parents will be invited to attend workshops in Spanish and English, the awards luncheon and closing ceremony. The camp will host thirty (30) qualified Hispanic students.

### TENTATIVE AGENDA

Below is a schedule of the tentative agenda, subject to change, for the summer camp. Some evening activities will be scheduled after 8:30 pm during the first three days of camp. Students **must check-in by 8:00 a.m. on the first day** of the camp for their housing assignment. Students will depart after the Awards Luncheon on the final day of the camp.

Wednesday	Thursday	Friday	Saturday
“Engineering Day”	“Science Day”	“Math Day”	“Technology Day”
8:00 am - 10:00 pm	8:00 am - 10:00 pm	8:00 am - 10:00 pm	8:30 am - 3:30 pm
Lunch, Dinner	Breakfast, Lunch, Dinner	Breakfast, Lunch, Dinner	Breakfast, Lunch
<ul style="list-style-type: none"><li>• Housing Check-In</li><li>• Welcome</li><li>• Campus tour of engineering and science labs</li><li>• Workshops on career and college choice</li></ul>	<ul style="list-style-type: none"><li>• Trip to local corporate facilities</li><li>• Science Activities</li></ul>	<ul style="list-style-type: none"><li>• Math Seminars and Activities</li><li>• Workshops on admissions exams, financial skills and writing skills</li></ul>	<ul style="list-style-type: none"><li>• Housing Check-Out</li><li>• Workshops financial aid and college application</li><li>• Awards Luncheon</li><li>• Farewell</li></ul>

### CAMP DATES & APPLICATION DEADLINE

The University of Texas at Arlington – Arlington, TX

June 23 – 26, 2010

For Dallas/Ft. Worth Metroplex residents and residents within a 50-mile radius.

**Application Deadline: Received By Friday May 14, 2010**

### ELIGIBILITY

- Hispanic descent
- Incoming 10<sup>th</sup> grade student (i.e. will be a high school sophomore in fall 2010)
- Minimum 2.5 GPA (unweighted, on a 4.0 scale)
- Resident within a 50-mile area of the camp location

## 2010 AHETEMS Summer Camp

### APPLICATION REQUIREMENTS

- AHETEMS Summer Camp Application
- Unofficial Copy of Transcript
- 250 Word Essay that answers the following two questions “*As a Hispanic/Latino, why do you want to be an engineer or scientist?*” and “*How will this summer camp help you?*”
- Letter of Recommendation from a Teacher (with original signature)
- Liability and Parent Permission Form
- Photo Release Form

### COST

The cost per student to attend the summer camp is \$10.00. Students who are selected will be sent additional information along with the deadline to mail payment. Students **do not need to send** the fee at the time of application.

### HOUSING

All students will be housed in a specially-designated residence hall at the university. Students **are not allowed** to commute to/from home during the summer camp. Resident advisors and other designated chaperones will also be housed in the residence hall to supervise students, control access to student rooms and enforce the quiet hours and **10:00 p.m. curfew**. *Additional housing information will be provided to selected participants.*

### MEALS

Breakfast, lunch and dinner will be provided during the summer camp. Students may bring their own snacks or snack money.

### TRAVEL

Travel to and from the location **WILL NOT** be provided. Students are responsible for arranging their own transportation to arrive at the summer camp by 8:00 a.m. on the first day of the camp and depart by 3:00 p.m. on the last day of the camp. On-campus parking permits will not be provided.

### SECURITY

Campus authorities will be notified about the camp so they are aware of the students’ whereabouts on campus. Students will be chaperoned by camp staff during authorized activities. Residence hall security will also be provided to ensure students safety.

### CONTACT INFORMATION

AHETEMS Office  
c/o 2010 AHETEMS Summer Camp at UTA  
The University of Texas at Arlington  
College of Engineering  
Box 19019  
Arlington, TX 76019-0019

**Phone:** (817) 272-1116      **Fax Number:** (817) 272-2548

**Email:** [ahetems@shpe.org](mailto:ahetems@shpe.org)      **Web site:** [www.ahetems.org](http://www.ahetems.org)

## 2010 AHETEMS Summer Camp

### STUDENT APPLICATION

#### STUDENT INFORMATION

*(Please Print or Type Legibly)*

First Name		Last Name	
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female	Grade Next Fall 2009:	<input type="checkbox"/> 10 <sup>th</sup> grade <input type="checkbox"/> Other: _____
Ethnicity	<input type="checkbox"/> Central American	<input type="checkbox"/> South American	<input type="checkbox"/> Asian American
	<input type="checkbox"/> Mexican American	<input type="checkbox"/> African American	<input type="checkbox"/> Anglo/White
	<input type="checkbox"/> Puerto Rican	<input type="checkbox"/> Native American	<input type="checkbox"/> Other: _____
Mailing Address:			
City, State, Zip Code			
Phone Number:		Alt. Phone Number:	
Email Address:			
School you are currently attending:			
School you are attending next fall 2009?			
Name of Parent/Guardian:			
Home Phone Number:		Work Phone Number:	
Cell Phone Number:		Email Address	

#### SCHOOL INFORMATION

<b>SCHOOL</b>	
Name:	
Mailing Address:	
City/State/Zip:	
<b>PRINCIPAL</b>	
Salutation:	<input type="checkbox"/> Dr. <input type="checkbox"/> Mr. <input type="checkbox"/> Mrs. <input type="checkbox"/> Ms.
First Name:	Last Name:
School Phone Number:	School Fax Number:
Email Address:	

Describe any extra curricular activities: \_\_\_\_\_

Describe any awards and honors: \_\_\_\_\_

Have you attended any Engineering or Science camps before?  Yes  No

If yes, name of camp(s) and year(s) \_\_\_\_\_

Applicant's Signature

Date

Parent/Guardian Signature

Date

## 2010 AHETEMS Summer Camp

<b>LIABILITY RELEASE, PARENT PERMISSION AND EMERGENCY CONTACT FORM</b>
--

I hereby state that I, \_\_\_\_\_, am the custodial  
**parent/legal guardian (please print)**

parent or legal guardian of \_\_\_\_\_, a minor. I therefore, grant  
**student (please print)**

permission for this student to attend/participate in any sponsored field trips or to attend any authorized activities as part of the **SciTech Summer Camp Program**.

I understand that **the University of Texas at Arlington, the Society of Hispanic Professional Engineers, Inc. (SHPE), the Advancing Hispanic Excellence in Technology, Engineering, Math and Science (AHETEMS)** and their affiliated staff will not be liable for any unauthorized leave by the above named student. I further understand that such unauthorized leave will be the responsibility of the student and the parent or the legal guardian as the signatory below.

I, \_\_\_\_\_, release and save harmless aforementioned parties and any  
**parent/legal guardian (please print)**

and all of its employees or volunteers from any and all liability for any and all harm arising to my son/daughter as a result of the field trips and/or activities, and waive any claims against them.

In the event of an emergency and if neither emergency contact can be reached; I, the undersigned, authorize **SHPE** to take any emergency medical measures deemed necessary for the care and protection of my child. This includes, if necessary, treatment by a physician, paramedic, and/or transfer to the hospital. I give permission for limited treatment for minor illness and/or injuries. In case of emergency, the student will be referred to the nearest medical facility for care at the expense of the parent or under insurance provided by the student's insurance.

Please indicate the name of the student's insurance provider \_\_\_\_\_

Students should immediately report any injury or illness symptom to the chaperones, resident advisors, or SHPE staff. Failure to report such a condition would be the sole responsibility of the student, and the aforementioned parties would not be held responsible in case the situation worsens.

**In case of emergency, please contact the following:**

Emergency Contact #1	Emergency Contact #2
Name _____	Name _____
Relationship _____	Relationship _____
Home Phone (____) _____	Home Phone (____) _____
Work Phone (____) _____	Work Phone (____) _____
Cell phone: _____	Cell phone: _____

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name of Student (PLEASE PRINT)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date of Birth

\_\_\_\_\_  
Age of Student

\_\_\_\_\_  
Name of School

2010 AHETEMS Summer Camp

**PHOTOGRAPH RELEASE AND CONSENT FORM**

Name of Student: \_\_\_\_\_

Age: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

I, \_\_\_\_\_ hereby, give permission to the **Society of Hispanic parent/legal guardian (please print)**

**Professional Engineers and the Advancing Hispanic Excellence in Technology, Engineering, Math and Science (AHETEMS)** and to photograph my child, \_\_\_\_\_, **student name (please print)**

only during their participation in the summer camp program. I further give permission to use their photographs and statements featuring their involvement in the summer camp program; for **SHPE** and **AHETEMS** publication purposes during or after this event.

\_\_\_\_\_  
Parent/Guardian Signature Date

Parent/Guardian Telephone: \_\_\_\_\_

Parent/Guardian Address: \_\_\_\_\_

*Please note: When photographs or quotes are used in SHPE's publications a copy of the publication is sent to the school.*