Summer Transportation Institute

Summer 2015

Student Application

June 29 - July 31, 2015

UNC PEMBROKE
Office of Regional Initiatives
115 Livermore Drive @COMtech./PO Box 1510
Pembroke, NC 28372
Telephone: 910/775-4000  Fax: 910/775-4005
Student Application

Please complete this application in its entirety, attach your essay, official transcript and a letter of recommendation from a teacher or high school counselor. **Completed packet is due on Monday, May 18th by 5:00pm. Return to the UNCP Office of Regional Initiatives, 115 Livermore Drive @ COMtech., Pembroke, NC.**

Name: ___________________________________________________________________

Address: __________________________________________________________________

__________________________________________________________________________

Home Phone: __________________________________________________________________

E-mail (if available): __________________________________________________________________

Best time to reach you by phone: __________________________________________________________________

Age: _______ Date of Birth: ___________ Gender: _______

School: __________________________________________________________________

School Address: __________________________________________________________________

Grade you are presently in: ______

What is your grade point average (Minimum 2.0 Required) ______

How did you hear about the institute? _____________________________________________

*If selected to participate, I hereby agree to complete the program in its entirety, and take full advantage of this worthwhile opportunity.*

Student’s signature: ___________________________ Date: __________

PARENT/GUARDIAN signature: ___________________________ Date: __________

(See attached consent form)
Summer Transportation Institute Questionnaire

1. List any jobs, internships, and/or volunteer experience you have participated in.

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

2. List any hobbies and/or extra-curricular activities you are involved with:
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

3. What are your plans after graduation from High School?
   ☐ Attend a 4-year college  ☐ Attend a technical/community college
   ☐ Get a Job  ☐ Other(Specify)______________________

4. If you plan to attend college, what is your intended major? Why?___________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

5. Are you familiar with the area of transportation as a major? ☐ Yes ☐ No

6. What other factors should we take into consideration when determining your
   selection for this program?_____________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________

7. **Essay Question:** Write an essay outlining your interest in the Summer Transportation
   Institute explaining how your participation will benefit your education/career objectives.
   Include, if you could secure any position in the Transportation Industry, what would it be
   and why? What characteristics do you have that would help you to be successful in a
   position in the Transportation Industry? (1 page limit, include on separate sheet of paper,
   12 pt. FONT, double-spaced)
Summer Transportation Institute

PARTICIPANT PERSONAL DATA FORM

Name of Participant: ______________________________________________________________________

Home Address: ______________________________________________________________________
                                                                 ______________________________________________________________________

Social Security #: ______________________________________________________________________

Do you have any special medical conditions?

 NO
 YES, Please Explain Below:

Do you have any food allergies or dietary restrictions?

 NO
 YES, Please Explain Below:

Do you have family health insurance?

 NO
 YES:

Name of Insurance Company: ______________________________________________________________

Policy Number: ________________________________________________________________

Phone Number of Insurer: ___________________________________________________________

Person to Contact in Case of Emergency:

Name: ______________________________________________________________________

Relation: ______________________________________________________________________

Address: ______________________________________________________________________
                                                                 ______________________________________________________________________

Telephone Numbers of Emergency Contact:

Daytime: ___________________________ Nighttime: ________________________________________

Signature of Student: ________________________________________ Date: _________________

Signature of Parent/Guardian: ________________________________ Date: ________________
SUMMER TRANSPORTATION INSTITUTE
STUDENT PARTICIPATION PERMISSION FORM

The parents or legal guardian (“Parent”) of ________________________________________________
Give permission for their child (“Student”) to attend all of the program activities included in the following
Summer Transportation Institute program administered by UNC Pembroke’s Office of Regional
Initiatives:

Program Sponsor’s Name: UNC Pembroke, Office of Regional Initiatives

Program Address: 115 Livermore Drive at COMtech., Pembroke, NC

Program Period: From: June 29, 2015 To: July 31, 2015

The Student and Parent hereby agree with UNC Pembroke’s Office of Regional Initiatives program
sponsor as follows:

1. The Student’s participation in the program is voluntary and the Student assumes all risks and
responsibilities concerning participation in the program, including all activities the Student participates
in, including but not limited to classroom instruction, field trips, evening and/or athletic activities. The
Parent understands that there may be some risk of injury to the Student in these activities, but still
desires that the Student participate in the program.

2. The Student and Parent consent to allow UNC Pembroke’s Office of Regional Initiatives, its
employees and agents to render medical treatment to the Student if such treatment should be
necessary during the course of the program, including but not limited to classroom activities, field
trips, evening and/or athletic activities and transportation to and from program events. The Parent is
solely responsible for the cost of such treatment for the Student. It is understood that any agent
taking action hereunder shall notify the Parent of the same as soon as possible and that UNC
Pembroke should not delay obtaining any necessary medical treatment while seeking to notify the
Parent. The Student and Parent authorize all physicians and other medical care providers,
including hospitals, to provide medical care to the Student in accordance with the direction of UNC
Pembroke, its employees and agents.

3. In consideration of the Student’s acceptance into and participation in the program, the Student and
Parent hereby agree to indemnify, hold harmless and release UNC Pembroke, its officers, board of
trustees, employees, agents and student mentors from liability resulting from any illness, injury,
damage to property, or other consequence directly or indirectly related to the Student’s participation
in the program.

4. The Student agrees to abide by all appropriate statutory laws and all rules and policies of UNC
Pembroke and/or the program sponsor. Failure to abide by the foregoing may result in termination of
the Student’s ability to continue in the program.

Student Signature: __________________________________________________________________

Date: __________________________________________________________________________

Parent’s Signature: ____________________________________________________________________

Date: __________________________________________________________________________
**PARENT/GUARDIAN MEDIA PERMISSION FORM**

<table>
<thead>
<tr>
<th>Name of Parent/Legal Guardian:</th>
<th>________________________________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Child:</td>
<td>________________________________________________</td>
</tr>
<tr>
<td>Street Address:</td>
<td>________________________________________________</td>
</tr>
<tr>
<td>City:</td>
<td>______________________ State: __________ Zip: __________________________</td>
</tr>
<tr>
<td>Phone Number:</td>
<td>________________________________________________</td>
</tr>
</tbody>
</table>

**NSTI Facilitator:** Mr. Darek Hunt

**NSTI Program:** Summer Transportation Institute (NSTI) 2015

I am the parent/legal guardian of the child named above, who is under the age of 18. I hereby provide permission to the UNC Pembroke, Office of Regional Initiatives to include certain personal information about my son/daughter/ward in connection with support of the NSTI program including publication in:

Promotional materials, press releases, newsletters, web site contents, annual reports and in all media now known or hereinafter devised in perpetuity.

I understand that this media will be accessible throughout the world and that stories including my son/daughter/ward’s personal information may appear in written, video, electronic, and other forms.

I understand that information provided by me on my son/daughter/ward will be used to promote NSTI and transportation education generally. I release UNC Pembroke and its agents and employees from any claims of infringement, invasion of privacy, defamation or misappropriation arising from the use of the information provided by me in the permitted manner.

**Signature of parent/legal guardian:** ________________________________________________

**Date:** ________________________________________________

Child Waiver