



SUMMER INSTITUTE FOR THE GIFTED

2010 RESIDENTIAL & COMMUTER PROGRAM APPLICATION

PLEASE NOTE: Approximately two weeks are required to review application materials to determine student eligibility. An acceptance letter will be sent to the student upon completion of the review.



SAVE TIME - APPLY ONLINE!
WWW.GIFTEDSTUDY.ORG

NOTES ON APPLYING:

- 1.) Use blue ink.
- 2.) Please print clearly.
- 3.) Fill out all 4 pages of this application in its entirety.
- 4.) If not paying by credit card, be sure to enclose your check or money order.
- 5.) New students must include documentation of eligibility.

SIG is the program of the:

NATIONAL
FOR
THE
GIFTED
& TALENTED

Please Print Clearly

1.) PLEASE INDICATE HOW YOU FIRST LEARNED ABOUT SIG

- ☐ Teacher/Counselor ☐ SIG Student ☐ Web/Newsletter
☐ Advertisement ☐ News Article ☐ Mailing ☐ Other _____

2.) STUDENT INFORMATION

First Name _____ Last Name _____ Nickname _____
Address _____
City _____ State _____ Zip Code _____ Country _____
Home Phone _____ E-mail _____
Date of Birth _____ Age during SIG Session _____ Gender: ☐ Male ☐ Female Grade in 09-10 school year _____
mo/day/year

3.) PARENT(S)/GUARDIAN(S) INFORMATION

1.) First Name _____ Last Name _____ Relationship _____
Business Phone _____ Cell Phone _____ E-mail _____
2.) First Name _____ Last Name _____ Relationship _____
Business Phone _____ Cell Phone _____ E-mail _____
Student Resides with: _____

3.) SCHOOL INFORMATION:

School name _____ ☐ Independent ☐ Parochial ☐ Public
Address _____
City _____ State _____ Zip Code _____ Country _____
Name of school: _____
Principal _____ G/T Coordinator or Counselor _____ Current (homeroom) Teacher _____

4.) SIG STATUS

Student is: ☐ New ☐ Returning (Returning students, please skip to section 5)
If this is your first year with the Summer Institute for the Gifted, you are required to include documentation of program eligibility. Please check the item(s) below that are enclosed to verify your eligibility:

- ☐ Academic Talent Search participation
- ☐ PSAT, SAT or ACT scores
- ☐ Standardized Test scores
- ☐ Letter confirming participation in local Gifted Program
- ☐ Other _____
- ☐ Two Letters of Recommendation (forms available online at www.giftedstudy.org)



5.) PARENT/ GUARDIAN PERMISSIONS

Please check the “yes” box where permission is given or the “no” box where permission is not given.

I hereby grant permission for my child, while attending the Summer Institute for the Gifted to:

- ☐ Yes ☐ No change courses on his/her daily schedule without confirming the changes with parent or guardian.
- ☐ Yes ☐ No receive selected materials about other educational opportunities from organizations sanctioned by SIG.

6.) PROGRAM SELECTION - Please check the program option that applies to the student

Student will take part in the: ☐ SIG Residential Program 
☐ SIG Commuter Program  (not available at Darmouth or Princeton.)

7.) CAMPUS SELECTION

This application is for SIG Residential & Commuter Programs (grades 4–11) only. For SIG Day Programs (grades K–8) visit us online at www.giftedstudy.org.

| <input checked="" type="checkbox"/> | CAMPUS | SESSION DATES | RESIDENTIAL FEE | COMMUTER FEE |
|-------------------------------------|--|--------------------|-----------------|--------------|
| <input type="checkbox"/> | Amherst College | July 18–August 7 | \$4,225 | \$2,195 |
| <input type="checkbox"/> | Bryn Mawr College | June 27–July 17 | \$4,225 | \$2,195 |
| <input type="checkbox"/> | Dartmouth College (<i>Grades 7-11 only</i>) | August 1–August 21 | \$4,995 | N/A |
| <input type="checkbox"/> | Emory University | June 20–July 10 | \$4,225 | \$2,195 |
| <input type="checkbox"/> | Princeton University (<i>Grades 7-11 only</i>) | July 25–August 14 | \$4,995 | N/A |
| <input type="checkbox"/> | UC Berkeley I | June 19–July 9 | \$4,895 | \$2,495 |
| <input type="checkbox"/> | UC Berkeley II | July 11–July 31 | \$4,895 | \$2,495 |
| <input type="checkbox"/> | UCLA | July 25–August 14 | \$4,895 | \$2,495 |
| <input type="checkbox"/> | UT Austin | July 11–July 31 | \$4,225 | \$2,195 |
| <input type="checkbox"/> | Vassar College | July 11-July 31 | \$4,225 | \$2,195 |

8.) COURSE SELECTION

Please list your first and second choices.



| PERIOD | 1ST CHOICE | 2ND CHOICE |
|----------|------------|------------|
| Period 1 | | |
| Period 2 | | |
| Period 3 | | |
| Period 4 | | |
| Period 5 | | |

9.) SATURDAY GET-AWAY DAYS - Residential Students Only

Please indicate your top three choices for Saturday Get-Away trips. Please place 1, 2 or 3 next to your selections.

____ Aquarium/Zoo ____ Amusement Park ____ Museum ____ Historical Tour ____ Theater Performance ____ Beach/Lake

10.) FEES AND PAYMENT SCHEDULE

-  **Residential Program fee includes:** a non-refundable application fee of \$150, the academic program, all course materials, laboratory fees, all room and board charges, World Class Coverage Insurance Protection Plan, recreational program costs, evening entertainment, Saturday Get-Away trips and lunch.
-  **Commuter Program fee includes:** a non-refundable application fee of \$150, the academic program, all course materials, laboratory fees, recreational program costs and lunch.

NON-COVERED FEES

The cost of transportation to and from the SIG campus, individual laundry expenses, personal spending money, the cost of books for selected courses, \$35 NSGT membership fee (see back cover of this catalog), World Class Coverage Insurance Protection Plan fee of \$50 for commuter students or International Resident Fee of \$75 (Applies to international students attending Residential Program only. This fee is non-refundable). Books will be available for purchase on the day of registration.

PAYMENT SCHEDULE

| PROGRAM | PAYMENT SCHEDULE | APPLICATION FEE (Submit with Application) | 2ND PAYMENT (Upon acceptance) | FINAL PAYMENT (Due May 30th) |
|---------------------|------------------|--|----------------------------------|--|
| RESIDENTIAL PROGRAM | | \$150 (non-refundable) | \$2,400 | \$1,675 Amherst, Bryn Mawr, Emory, UT Austin and Vassar \$2,345 UC Berkeley and UCLA \$2,445 Princeton and Dartmouth |
| COMMUTER PROGRAM | | \$150 (non-refundable) | \$1,200 | \$845 Amherst, Bryn Mawr, Emory, UT Austin and Vassar \$1,145 UC Berkeley and UCLA |

ADDITIONAL PROGRAM ADJUSTMENTS

Please check any that apply. These items will be added or deducted on your final invoice. Please refer to the catalog for full program details.

| <input checked="" type="checkbox"/> | FEE DESCRIPTION | TOTAL |
|-------------------------------------|--------------------------------------|--------------------------|
| <input type="checkbox"/> | Single Room Option | + \$250 |
| <input type="checkbox"/> | International Student Fee (Res only) | + \$75 |
| <input type="checkbox"/> | Commuter Insurance opt out* | - \$50 |
| <input type="checkbox"/> | NSGT Membership opt out* | - \$35 |
| <input type="checkbox"/> | Meet and Greet Service | <i>see catalog pg 32</i> |

* Commuters will be charged for World Class Coverage Insurance fee of \$50 and the NSGT membership fee of \$35 if the opt out box is **not** selected. Insurance is provided in the residential program fees.

11.) REFUND POLICY

PRIOR TO THE START OF SIG

Because SIG must hire staff and confirm space at its host institutions long before the start of the summer sessions, we are unable to make program refunds to students who cancel **after May 15th**.

MEDICAL WITHDRAWAL

The SIG World Class Coverage Insurance Protection Plan provides some tuition relief in the event of a medical withdrawal both prior to and during the program. It also provides medical coverage in such an event. Please refer to page 29 of the 2010 SIG Catalog for more information.

Under no circumstances, medical or otherwise, will SIG refund the \$150 application fee due at the time the application is submitted.

12.) ADMISSIONS AND APPLICATION FEE

Admission to the Summer Institute for the Gifted programs is on a rolling, first-come, first-served basis for qualified students. Applications are accepted and processed upon receipt. Admission to the 2010 Summer Institute for the Gifted program shall be granted or denied at the sole discretion of SIG/NSGT. Applications will be accepted only if space is available. The \$150 deposit must accompany your completed, signed application. You will be billed for the balance.

PAYMENT OPTIONS: SIG accepts checks, money orders, Visa, MasterCard and American Express credit cards.*

☐ Check (Please make payable to Summer Institute for the Gifted)

☐ Money order enclosed for \$ _____

☐ Please charge my credit card for \$ _____ ☐ Visa ☐ MasterCard ☐ American Express



Card number _____ Expiration date _____

Signature of cardholder _____ Cardholder’s name (please print) _____

Daytime phone _____

* Please be advised that returned checks and declined credit cards will incur a \$25 charge per occurrence.

13.) STUDENT RESPONSIBILITY

I understand that, as a participant in the Summer Institute for the Gifted (SIG), I have the responsibility to work to the best of my ability in all of my classes, that I will conduct myself appropriately and follow all rules, regulations and policies of the SIG program, that I will support the efforts of SIG staff and participants to preserve the cleanliness and beauty of the campus, that I will respect the property of others, and that I will respect the rights and privileges of all SIG students, faculty, staff, and others of the campus community. I understand that failure to comply with the above statement may lead to dismissal from the program.

Signature of Student _____ Date _____

14.) AGREEMENT AND RELEASE

By signing the application for a National Society of the Gifted and Talented ("SIG/NSGT") program, the student and the parents agree to the following terms and conditions:

1. We have read and accept the terms and conditions set forth in the Summer Institute for the Gifted catalog, which are incorporated in this agreement. This agreement is a legally binding contract.
2. We unconditionally release SIG/NSGT from any claims for damage, injury, loss or expense incurred as a result of the applicant's participation in the SIG program unless the loss is caused by the gross negligence of SIG. We also release SIG/NSGT from claims for damage, injury loss or expense (including SIG tuition and other costs) caused by events beyond its control, including program termination, resulting from acts of God...regulations or other causes.
3. The student is responsible for exercising caution and common sense at all times to avoid injuries SIG/NSGT does not provide supervision or support during periods of independent travel.
4. If the students become ill or incapacitated, SIG/NSGT may take such actions as it considers necessary under the circumstances, including securing medical treatment. We release SIG/NSGT from any liability relating to this medical care. We also authorize SIG/NSGT to take whatever action it deems to be necessary and in the student's best interest in the event of any unforeseen event or condition. If SIG/NSGT incurs any expense on the student's behalf that is not covered by insurance, we agree to make immediate repayment upon request.
5. The student must comply with SIG/NSGT's rules, standards and instructions, and understands that failure to do so may result in being sent home at our expense, with no refund. The student's participation may be terminated if expelled from the program or if SIG/NSGT, in its sole discretion, determines that the student's continued participation is incompatible with the interests, harmony, comfort or welfare of other students. We agree to indemnify SIG/NSGT if the student does anything that causes SIG/NSGT to sustain financial loss or liability.
6. We understand that SIG/NSGT reserves the right to make changes, cancellations, or substitutions in cases of emergency or changed conditions, or based upon the interest of the group. The program fee portion of the total SIG cost is nonrefundable as well as the application fee. If a serious illness prevents the student from attending or completing the session, insurance claims may be submitted by participants in the World Class Protection Plan. Requests must be made in writing and include a valid doctor's note. Requests must be made within 30 days of withdrawing from the program. If a program is terminated or canceled, SIG will consider the circumstances and may, in its sole discretion, issue a partial refund or credit.
7. If the student is not a citizen of the United States, we understand and accept that it is our responsibility to obtain all visas and required documents in order to enter all the countries on our itinerary and participate in the SIG/NSGT program. We shall hold SIG/NSGT harmless in the event the student fails to obtain the necessary documents for participation in the program.
8. This agreement will be effective when the application is accepted by SIG/NSGT and shall be governed by the laws of the State of Connecticut.
9. This agreement cannot be modified except in writing by SIG/NSGT.
10. We hereby grant to the SIG/NSGT and to its employees, agents and assigns the right to photograph my dependent and use the photo and or other digital reproduction of him/her or other reproduction of his/her physical likeness for publication processes, whether electronic, print, digital or electronic publishing via the Internet. If you do not want your child to be photographed, please check the box next to the signature line below.
11. We agree that any dispute with SIG/NSGT that is not settled informally will be submitted to binding arbitration, to be conducted in substantial accordance with the rules of the American Arbitration Association. The location of the arbitration and identity of the arbitrator will be decided by mutual agreement, with the costs to be shared equally between the parties, and the decision of the arbitrator shall be final. By signing this agreement, we understand that we are giving up the right to have any claim against SIG/NSGT decided in court before a judge or jury.
12. References in this agreement to "SIG/NSGT" shall include the National Society for the Gifted & Talented, and all of its agents, employees, affiliated companies, campus directors, deans, chaperones, group leaders, teachers, host school and school officials. All references to "parents" of the applicant shall include the legal guardian or other adult who is responsible for the applicant.

By signing this document, I acknowledge that I have read and accept the terms of the Agreement and Release above and agree that those terms constitute my agreement with SIG/NSGT. I unconditionally release the SIG program from any claims for damage, injury, loss or expense of any sort incurred directly or indirectly in conjunction with the participation of my child in the program unless the loss is caused by the gross negligence of SIG.

It is the responsibility of each applicant to adhere to the payment schedule in order to maintain his/her enrollment status in the SIG program.

I have read the SIG program catalog and application pages including the paragraph in section 13 signed by my child. I have read and understand the refund policy as stated in section 11 of this application. I understand that it is my responsibility to meet all financial obligations of the SIG program. I understand that I am responsible for the cost of repairing or replacing any property that my child damages while on campus. I understand that if my child fails to follow SIG program rules and regulations, he/she may be dismissed from the program without refund and may be subject to disqualification from attendance at future sessions of the Summer Institute for the Gifted.

I/we certify the above information is complete and correct. I/we understand that any misrepresentation may result in the expulsion of the applicant from the program. I have read the catalog and agree to the SIG/NSGT policies and procedures, including those concerning liability, responsibility, refunds, health, changes in dates, accommodations, courses, billing, and program cancellation or termination. The agreement will be effective when accepted by SIG/NSGT and is governed by the laws of the State of Connecticut.

Signature of Parent or Guardian _____ Date _____

☐ Photo opt out.
Refer to item 10.

MAIL APPLICATION AND PAYMENT TO:

SUMMER INSTITUTE FOR THE GIFTED, *Admissions Office*
River Plaza | 9 West Broad Street | Stamford, CT 06902-3788