



Application

Northeastern University/Marine Science Center
COSA Coastal Ocean Science Academy
August 10 - August 22, 2009

Please type or print clearly all requested information on this application form. Please return all information by mail to the Outreach Program at the address on the back of this form. Applicants will be accepted on a first come first serve basis, so please get all application materials in early. **ONCE STUDENTS HAVE BEEN NOTIFIED OF ACCEPTANCE INTO THE PROGRAM A DEPOSIT IS DUE WITHIN THREE WEEKS OF ACCEPTANCE NOTIFICATION.** All applicants must be entering the 9th or 10th grade in Fall 2009.

Participant Information

Name: _____
(Last) (First) (M.I.)

Address: _____
(Street) (City) (State) (Zip Code)

Date of Birth: ____/____/____ Phone: _____ Phone: _____
(month/day/year) (daytime) (evening)

School: _____

Email Address: _____

I am interested in transportation from the NU campus (Add \$100 to cost of program - space limited)
Yes _____ No _____

Parent/Guardian Information

Name: _____
(Last) (First) (M.I.)

Address: _____
(Street) (City) (State) (Zip Code)

Phone (Daytime): _____ Phone (Evening): _____

Emergency Contact Information (if parent/guardian is not available)

Name: _____ Phone (Daytime): _____

Relationship to Student: _____ Phone (Evening): _____
(OVER)

Participant Contract

Upon acceptance, I commit to attending both weeks of the COSA Coastal Ocean Science Academy. I am willing to abide by the conditions and regulations set forth by Northeastern University and the COSA Coastal Ocean Science Academy. I realize that failure to comply with these rules may result in dismissal from the program.

Participant Signature

Date

Participant Name (please print clearly)

Parent/Guardian Understanding and Approval

Upon acceptance of my child, I am committed to his/her compliance with the conditions and regulations set forth by Northeastern University and the COSA Coastal Ocean Science Academy. I understand that if he/she does not abide by these rules it may be reason for dismissal from the program. I also understand that program activities/field trips start at given times and if my child does not arrive by the designated time he/she will need to return home immediately. I understand that the COSA Coastal Ocean Science Academy will run Monday- Friday from August 10 – August 21, with an award presentation on August 22; I will make every effort to ensure that my child participates in the academy every day.

Parent/Guardian Signature

Date

Parent/Guardian Name (please print clearly)

Application materials should be returned as soon as possible to ensure a space in the program.

**Applications can
be mailed to:**

**Outreach Program
Marine Science Center
430 Nahant Rd
Nahant, MA 01908
(781) 581-7370 x321
Facsimile: (781) 581-6076**