



BEST Experience Application Form

July 20th-25th, 2014

Please type or print clearly and submit application by May 15, 2014. All information provided is confidential.

Student Name: _____ Age: _____

School Name/City & State: _____

Grade (2014-2015 school year): _____ 10th _____ 11th _____ 12th GPA: _____ out of _____

Has/will the student complete Algebra I by the program date? _____ Yes _____ No

Parent(s) or Legal Guardian(s) Name(s): _____

Student:

Street Address: _____

City, State, Zip: _____

Home Phone: : _____ Cell Phone: : _____

Email Address: _____

Parent/Guardian:

Street Address: _____

City, State, Zip: _____

Home Phone: : _____ Cell/work Phone: _____

Email Address: _____

Special Requirements:

Please list any dietary needs or restrictions for the student.

Students will walk to all activities on campus. Please list any physical challenges of the student.

Please list any prescription and OTC medications that the student needs daily.

We (student/parent/guardian) certify that that information given above is correct to the best of our knowledge.

Student signature

Parent/Guardian Signature

Please send the application form (via mail, fax or email) using the following:

UAH BEST Experience
College of Engineering- EB 157
301 Sparkman Drive
Huntsville, AL 35899
Email: engineering@uah.edu
Fax: 256.824.7412