

Application Instructions

Applying to Exploration

Admission to Exploration is contingent upon space availability, as well as age considerations. Students may enroll for one or two sessions. Space in the Program is reserved upon the receipt of a deposit and a completed application.

Students who reserve space at Exploration before January receive advance copies of our 2010 course catalog and have the first opportunity to reserve space in specific courses, workshops, and special events.

The 2010 course catalog will be available for the general public in early January.

Reserving a Space

An application and deposit is used to reserve your space at the Program. We prefer applicants to use our secure online application.

Applicants who wish to pay their deposit via credit card must use our online application.

You may use either application to pay your deposit via check or bank wire. Please note that credit cards are accepted for online deposits only, not for final payment. Final payments must be made by check, domestic wire, or international cable.

Upon receipt of a completed application and deposit, our Program registrars will send a confirmation of enrollment. Within two weeks of enrollment, applicants must submit a school evaluation form (available on our website's downloads page), which should be completed by a teacher or guidance counselor who knows the student well. Applicants who attended and completed one of the Exploration Programs in 2009 do not need to submit a school evaluation form.

In addition, medical and health forms (sent to families after enrollment) must be received by Exploration prior to the start of the Program, or a student will not be allowed to register and attend any Exploration Programs.

Selecting Courses

New courses, workshops, and special trips for 2010 are announced in January.

While there is a similar range of courses and events offered each year, specific options may change year to year.

All students enrolled prior to January receive advance notice of these options and, when they become available, receive information on how to select their courses.

Students who enroll after new courses, workshops, and special trips are announced in January will receive information on how to select their courses upon confirmation of space availability.

2010 Program Dates

RESIDENTIAL PROGRAMS

Session One: June 27 - July 17

Session Two: July 18 - August 7

DAY PROGRAMS

Session One: June 28 - July 16

Session Two: July 19 - August 6

Deposits

A deposit payment is required in order to reserve a space at Exploration. Deposits are credited to your final balance. Please note, Exploration will not reserve space at the Program until your deposit payment is received. Deposit rates are as follows:

	One Session	Two Sessions
Residential Program	\$750	\$1000
Day Program	\$400	\$600

Once your deposit payment has been received, Exploration Summer Programs will email confirmation to you with the amount of your deposit credited to the tuition balance.

Credit cards are accepted for online deposits only, not for final payment.

In the event that space is not available at a Program, families will be notified by email that the student has been placed on a waitlist and Exploration will hold the deposit. If space does not become available for the student, or if the family wishes to be removed from the waitlist, the deposit will be returned at that time.

Students applying after the final balance due date of May 1, 2010 must pay the bill immediately after acceptance. Students enrolling after June 1, 2010 must pay the final bill by bank check, certified check, money order, or wire transfer. Any returned checks will result in a charge of \$20.

Refund Policy

Deposits are refundable until March 1, 2010. After that date, deposits are non-refundable.

Between May 1 and the Program's start date, a full or partial refund of tuition (minus the deposit) will be considered only if the student can be replaced.

Every student enrolled at Exploration is automatically covered by tuition refund insurance administered by A.W.G. Dewar, Inc. and underwritten by the member companies of OneBeacon Insurance Group. This plan does not provide coverage for any event or circumstances prior to the first day of the Program session. The insurance covers students once they have arrived at the Program and provides for a partial tuition refund based on the number of days left in a session should a student leave before the end of the session. The only refunds that will be made are those that are covered under the terms of this insurance policy.

Final Payment

Exploration Summer Programs will mail and email an invoice for the Programs selected.

Final payments must be received in full by May 1, 2010 for all students regardless of which session they will attend.

Final payments must be made by check (drawn on US banks) or wire transfer. All funds must be transmitted in US dollars. Credit cards are accepted for online deposits only, not for final payment.

Payment by Check

Checks must be drawn on US banks in US funds. We will not accept checks drawn on a foreign bank.

MAKE CHECKS PAYABLE TO: Exploration School, Inc.

Include the name of the student and the Program they are attending on the check (e.g. Jane Smith, Senior Program).

MAIL TO:
Exploration School, Inc.
932 Washington Street
PO Box 368
Norwood, MA 02062
USA

Payment by Wire

All wires should be in US dollars and net of all bank fees.

There are often bank service charges for international wires at both the originating bank and intermediary banks before the money arrives at Exploration's account. Your bank can provide you with further details.

Our bank, as a US bank, does not have an IBAN and our account does not have a SWIFT number. International banks should not have a problem wiring funds to us without an IBAN or a SWIFT.

Specify the student's name and the Program they are attending (i.e. Jane Smith, Senior Program).

Here is the information you will need to wire your deposit:

Beneficiary Bank Name: TD Bank, Massachusetts
Beneficiary Bank Address: 95 Washington Street
Canton, MA 02021

Beneficiary Bank ABA Number: 211 370 545

Beneficiary's Name: Exploration School, Inc.
Beneficiary's Address: 932 Washington Street
PO Box 368
Norwood, MA 02062

Beneficiary's Account Number: 8246 696 683

EXPLORATION APPLICATION 2010

[For Students Entering Grades 10-12]

For Office Use Only



Student's Last Name

First Name

STUDENT INFORMATION

STUDENT'S NAME: First, Last (Please write name as if on an official document) _____ Nickname _____

Home Address _____

City _____ State/Province _____ Postal Code _____ Country _____

Student's Email _____ Phone _____

Name of Current School _____ Type (Public, Private, Charter...) _____ School Location (Country) _____

Primary Language of Instruction at School _____ Primary Language of Student _____

DATE OF BIRTH (Month/Day/Year) _____ / _____ / _____

Gender

- Male
 Female

Grade in September 2010

- Tenth Grade
 Eleventh Grade
 Twelfth Grade

CHOOSE PROGRAM + SESSION

The Senior Program (3-Week)

For each session that you will attend, please mark your preference as either a residential or day student.

Residential Student

- First Session (6/27-7/17)
 Second Session (7/18-8/7)

Day Student

- First Session (6/28-7/16)
 Second Session (7/19-8/6)

Focus Programs (2-Week)

Focus programs are residential only.

Culinary Arts

- First Session (7/4-7/17)
 Second Session (7/18-7/31)

TV + Movie Industry

- First Session (7/4-7/17)
 Second Session (7/18-7/31)

FOR 10TH GRADERS ONLY

PARENT/GUARDIAN INFORMATION

If Parents are Separated/Divorced: Please note that unless provided with legal documentation to the contrary, Exploration will provide both parents with equal access to a child and his/her records. Please contact the Head of Program to discuss any concerns with this policy.

PERSON TO BE BILLED (Please write name as if on an official document) _____

Home Address _____ Email _____

City _____ State/Province _____ Postal Code _____ Country _____

Primary Phone _____ Secondary Phone _____ Fax Number _____

Parent/Guardian Name#1 if different than person to be billed (Please write name as if on an official document) _____

Home Address _____ Email _____

City _____ State/Province _____ Postal Code _____ Country _____

Primary Phone _____ Secondary Phone _____ Fax Number _____

Parent/Guardian Name#2 if different than person to be billed (Please write name as if on an official document) _____

Home Address _____ Email _____

City _____ State/Province _____ Postal Code _____ Country _____

Primary Phone _____ Secondary Phone _____ Fax Number _____

FINANCIAL AID— Before applying for financial aid, we strongly recommend you contact our Financial Aid Coordinator at 781.762.7400.

Exploration offers two forms of financial aid: Grants and Scholarships. Both types of aid are based on financial need; there are no merit-only awards. Grant awards are up to \$1000 for residential students/\$500 for day students. If you are applying for a grant, a deposit is required. Scholarship awards range from \$1,000 to more than \$4,800 and do not require a deposit. Full scholarships are extremely competitive. (Grants are available for the Focus Programs, but scholarships are not.)

- I INTEND TO APPLY FOR A GRANT and will submit a deposit with my application.
- I INTEND TO APPLY FOR A SCHOLARSHIP and will NOT submit a deposit.

HEALTH INSURANCE INFORMATION

If this section is not completed, or if the student has inadequate medical coverage, the student will be charged for a short-term insurance policy. At this time, the cost of the insurance policy has not been set.

- Health Insurance:**
- Our family has American health insurance issued by an insurance company located in the USA. (Please complete the section below).
- Please enroll my student in the short-term basic accident/health insurance policy.

SUBSCRIBER'S NAME	Employer
Policy Number/ID Number	Group Number
Insurance Carrier (i.e. Blue Cross/Blue Shield)	Type of Coverage (i.e. HMO, PPO, etc.)

Medical forms will be made available to enrolled families beginning in January. These forms—some of which will need to be completed by a doctor—are required for registration and must be returned to Exploration by April 1, 2010. Additionally, families with American insurance will need to submit a copy of their insurance card. For students applying after March 15, these medical forms will be due within three weeks of the day of confirmation. Registration is incomplete and students will NOT be admitted on arrival day without all necessary medical forms and appropriate health insurance coverage.

EMERGENCY CONTACT INFORMATION

Please list, in order of preference, two emergency contacts (up to three) other than the parent/guardian(s) already listed in the application. Please list at least one person who can be reached during the day and at least one person who can be reached during evenings and weekends.

For international families: if possible, please include at least one emergency contact who lives in the United States and could serve as a primary US contact in the event that contacting a student's family is difficult.

NAME #1	Relationship to Student	Primary Phone	Secondary Phone
NAME #2	Relationship to Student	Primary Phone	Secondary Phone
NAME #3	Relationship to Student	Primary Phone	Secondary Phone

DAY STUDENT TRANSPORTATION

This section is only for day students who will be staying off-campus with family or friends in the New Haven area.

- My family will provide transportation.
- I am interested in the daily bus shuttle to/from Union Station in New Haven
- I will be driving to/from the Program daily

LOCAL GUARDIAN'S NAME (if different from that listed in Parent/Guardian information on page 1)	Relationship to Student		
Home Address	City	State	Zip
Primary Phone	Secondary Phone		

DISCOUNT ELIGIBILITY

Sibling Discount: My sibling is also attending Exploration. His/her name is: _____

Sibling will attend First Session Second Session **at the** Junior Program Intermediate Program Senior Program

Employee Discount: Parent/Guardian is an employee of Exploration Summer Programs.

His/her name is: _____ Position: _____

School Discount: Parent/Guardian is a full-time employee of Yale University Wellesley College St. Mark's School.

His/her name is: _____ Position: _____

APPLYING TO HS2C: The College Writing Concentration

Admission to HS2C: The College Writing Concentration is competitive and requires the submission of a letter of application.

The letter of application should be addressed to the HS2C Admission Committee and should describe your interest in HS2C and why you believe you are a strong candidate for the course.

Please restrict your letter to approximately 500 words.

SUBMITTING YOUR LETTER:

Please email your letter:

HS2C@explo.org

Alternatively, mail your letter:

**HS2C Admissions Committee
Exploration Summer Programs
932 Washington Street
Norwood, MA 02062**

Do not forget to put your name on your materials.

Upon receipt and review of your letter, the HS2C Admission Committee will make a determination on your acceptance into the Writing Concentration within ten days.



FOCUS PROGRAM APPLICATION LETTER

Applicants to our Focus Programs are required to submit an letter as part of the application process.

The letter should answer the following three questions:

- 1) Why are you interested in this Focus Program?**
- 2) What do you hope to get out of this Focus Program?**
- 3) What will you contribute to this Focus Program?**

PLEASE NOTE: Your application to the Focus Program will not be processed until Exploration receives both your application letter and a completed School Evaluation Form. * Once the Admissions Committee has received all items related to your application, the Committee will make a determination on your acceptance into the Program within ten days.

*The School Evaluation Form is not required for students who attended Exploration in 2009 and who completed the Program in good standing.

SUBMITTING YOUR FOCUS PROGRAM LETTER:

Email your completed letter (with your name and the Focus Program session to which you are applying) to the appropriate email address:

Culinary Arts Focus Program [entering grades 8-10]:	culinaryarts@explo.org
Television + Movie Industry Focus Program [entering grades 8-10]:	tvmovie@explo.org
Veterinary Science Focus Program [entering grades 6+7]:	vetscience@explo.org
Emergency Medicine Focus Program [entering grades 6+7]:	ER@explo.org

Alternatively, mail your letter to:

**Focus Program Admissions Committee
Exploration Summer Programs
932 Washington Street
Norwood, MA 02062**

STUDENT AGREEMENT [for students entering grades 10-12]



THIS SECTION MUST BE SIGNED BY THE ENROLLING STUDENT AND CANNOT BE ALTERED.

COMMUNITY STANDARDS Exploration prides itself on creating an atmosphere that nurtures the diverse interests, needs, and backgrounds of our student and staff populations. Students attending Exploration have a unique opportunity to investigate a variety of new skills, talents, and interests within an environment structured for personal choice and growth. As with many personal freedoms, the liberty granted to students at Exploration carries with it limits and responsibilities. We expect students to uphold our community standards and to refrain from any behavior that jeopardizes the well-being of themselves or others at the Program.

In order to maintain a safe environment for everyone, Exploration has expectations and rules for student conduct. These are more fully expressed in the Student Handbook, which will be available in the spring. The following list is not meant to be exhaustive, but instead gives some examples of our standards and expectations. A student who violates a Major Rule, or whose conduct, in the sole discretion of Exploration School, Inc., warrants his or her leaving the Program, will be subject to immediate dismissal. Exploration will not be responsible for any travel expenses and will not provide a refund of tuition and fees. (Any refund of tuition is at the discretion of Dewars Insurance as per the tuition refund insurance plan.) Remaining in the presence of an open violation of a Major Rule may constitute a Major Rule violation; that is, if you are in the presence of another student who is breaking a Major Rule, it is treated as if you are breaking the rule yourself. Some examples of conduct which are in violation of the Major Rules include:

- Use, possession, or distribution of drugs, alcohol, cigarettes or tobacco, including misuse of prescription or over-the-counter medication.
- Use, possession, or distribution of weapons, violence or threat of violence, hazing and harassment, misuse of computers and electronic communications, and bullying.
- Use, possession, or distribution of stolen property as well as vandalism, damage, or the willful destruction of property.
- Violating policies regarding the physical boundaries of the Program, including staying inside prescribed areas in New Haven, staying within the dormitories after evening check-in, and staying inside the boundaries established on trips.
- Violating the policies governing single-gender spaces.
- Use of any flame indoors, including matches, candles, or incense.
- Failure to conduct oneself with honesty and integrity, and failure to respect the well-being and rights of others.

In addition to the above, there are other rules and guidelines governing student conduct at the Program. You will receive a Student Handbook in the spring and you are responsible for reading it, knowing its contents, and following all Program rules and guidelines described therein. You are also responsible for following the rules and guidelines set by our staff during the course of the Program. Any questions or concerns about our community standards or rules should be brought to the Dean of Students.

Exploration not only forms a relationship with the student who attends the Program, but also with his or her parents or guardians. For the Program to work in a positive and safe way for our students, parents/guardians must be able to support our policies and procedures. Exploration School, Inc. reserves the right to dismiss a currently enrolled student if the student's parents/guardians are not cooperative and/or compliant with Exploration policies and procedures. In addition, Exploration reserves the right in subsequent summers to deny enrollment for similar reasons.

My signature below indicates that I have read and understand the community standards listed above, and that I am willing to abide by the rules in order to remain enrolled at the Program.

Name of Student

Signature of Student

Date

PARENT AGREEMENT [for students entering grades 10-12]



THIS SECTION MUST BE COMPLETED BY A PARENT OR LEGAL GUARDIAN AND CANNOT BE ALTERED.

EMERGENCY CARE AUTHORIZATION In the event that I cannot be reached with reasonable effort, I hereby authorize by my signature any licensed physician or licensed health care professional selected by the administration of the Exploration School, Inc. to secure treatment for, give injections, administer anesthesia, perform surgery, and/or do any other procedure which, in his/her opinion, is reasonably necessary in light of the condition of the named student.

Name of Student

Signature of Parent or Legal Guardian

Date

ADMISSIONS CONSIDERATIONS Many different types of students have had successful summers at Exploration. In assessing whether the Program is suitable, parents/guardians need to understand the Program might not be a good match for some students. Exploration includes a mix of both structured and unstructured time. Students need to be able to both commit and adhere to intensive schedules and clearly-defined boundaries. In addition, students are afforded appropriate levels of independence, and we expect our students to handle the choices and responsibilities they are given with an appropriate level of maturity. If parents/guardians have any questions as to whether Exploration is the right place for their child, we ask that they contact our Admissions Office before submitting an application (781.762.7400).

Exploration not only forms a relationship with the student who attends the Program, but also with his or her parents or guardians. For the Program to work in a positive and safe way for our students, parents/guardians must be able to support our policies and procedures. Exploration School, Inc. reserves the right to dismiss a currently enrolled student if the child's parents/guardians are not cooperative and/or compliant with Exploration policies and procedures. In addition, Exploration reserves the right in subsequent summers to deny enrollment for similar reasons.

INITIAL HERE

PROGRAM ATTENDANCE Before you enroll your student, please make sure he or she will be able to attend the entire session. Exploration has an overall curricular plan that includes courses, activities, workshops, trips, and student life meetings and activities. Since each session of the Program is short, it is not appropriate for a student to miss several days of a session or a part of each day of the Program, whether at the beginning, middle, or end of the session. If family vacations or other obligations will cause a student to miss several days or more, the student will not be allowed to register. Please review our refund policy below.

REFUND POLICY Deposits are refundable until March 1, 2010. After that date, deposits are non-refundable. Between May 1 and the Program's start date, a full or partial refund of the tuition (minus the deposit) will be considered only if the student can be replaced. Every student enrolled at Exploration is automatically covered by tuition refund insurance administered by A.W.G. Dewar, Inc. and underwritten by the member companies of OneBeacon Insurance Group. This plan does not provide coverage for any event or circumstances prior to the first day of the Program session. The insurance covers students once they have arrived at the Program and provides for a partial tuition refund based on the number of days left in a session should a student leave before the end of the session. The only refunds that will be made are those that are covered under the terms of this insurance policy.

PERMISSION TO PARTICIPATE I give my full consent and permission for my child to participate in all co-curricular, extra-curricular, recreational, and athletic activities and off-campus trips offered by Exploration School, Inc., and I represent that my child's physician has provided him/her with medical clearance to participate in all these activities. I also represent that my child has not been advised by a health care provider that he or she should not participate in physical or other activities offered by Exploration School, Inc., except as already disclosed to Exploration School, Inc. in writing. I represent I will inform Exploration School, Inc. immediately if the aforementioned statements are no longer accurate.

ACKNOWLEDGEMENT OF RISK I recognize that Exploration School, Inc. believes that students learn best through active involvement in a variety of learning experiences. I am aware that all students will be involved in a wide range of co-curricular and extra-curricular programs. I am also aware that Exploration School, Inc. believes that such activities are of greatest value when students are afforded increased autonomy, independence, and responsibility. I understand that this may also expose students to risks, including, but not limited to, risk of personal injury, illness, death, and property damage and theft. I acknowledge and accept these risks on behalf of my child.

RELEASE In consideration of attending Exploration School, Inc., I, on behalf of myself and my child and his/her other parent, and our respective heirs, executors, administrators, successors and assigns (collectively referred to as "Releasors"), hereby voluntarily release, discharge and relinquish fully any and all claims, causes of actions, and legal actions, of all types, against Exploration School, Inc., its owners, officers, trustees, employees, agents, insurers, and representatives (collectively referred to as the "Released Parties"), and agree that Releasors will not prosecute, present or otherwise pursue any claim of action for personal injury, property damage or theft, or wrongful death against any Released Parties arising from, or relating to, Releasor's participation in Exploration School, Inc.'s programs, including but not limited to, the activities on and off the primary location of the programs, and all related travel, to the fullest extent permitted by law.

GOVERNING LAWS This Agreement and all matters relating hereto, including any matter or dispute arising in contract, tort, violation of statute or otherwise, shall be interpreted, governed, and enforced according to the laws of the United States of America, and, in particular, of the Commonwealth of Massachusetts. The parties to this Agreement consent and submit to the exclusive jurisdiction and venue of the Massachusetts courts in Norfolk County, Massachusetts and/or the Federal District Court, Suffolk County, Massachusetts as determined by applicable rules of court, to address all matters arising under or related to this Agreement. The parties acknowledge that this Agreement and the student's participation in Exploration School, Inc.'s programs constitute a business transaction within Massachusetts.

GENERAL PARENT/GUARDIAN AGREEMENT Exploration School, Inc. in the operation of its summer program shall not be held responsible for any personal injury or loss of property suffered or caused by any of its students. Exploration School, Inc. does not reimburse students for personal injury, or loss, theft, or damage of personal property. Exploration School, Inc. reserves the right to terminate participation of any student without refund and without formal hearing when the administrators of the Program deem it to be in the best interest of either the student or the Program. Exploration School, Inc. is granted permission to use the names and photographs of Program participants in publicity materials, including its web site. I affirm that I have read and accept the Admissions Considerations, Program Attendance, Refund Policy, Permission to Participate, Acknowledgement of Risk, Release, and Governing Laws as stated above. I also understand that my child's enrollment at the Program is contingent upon his/her ability to abide by the rules and standards of the Program as outlined in Community Standards as stated above and as required during the course of the Program. I affirm that all the information I have provided in this application is complete and true. The undersigned parent or guardian acknowledges reading the above, understanding its content, and agreeing to its terms and conditions.

Name of Student

Signature of Parent or Legal Guardian

Date



This evaluation is due within two weeks of receipt of your confirmation.
The application process is not complete until we receive this evaluation.

**Evaluation must be typed
 or printed in BLACK ink**

TO BE FILLED OUT BY APPLICANT

Final acceptance to the Program is contingent upon receipt of this evaluation. Please complete all information in the two boxes on this page, except for the evaluator's signature. Give the form, along with a stamped envelope addressed to Exploration, to a teacher, guidance counselor, or principal who knows you well. Address the envelope to:

Exploration Summer Programs, 932 Washington Street, PO Box 368, Norwood, MA 02062

Name of Student _____ Student Phone _____

Student Address _____

Under the provision of the Family Rights and Privacy Act, I waive any right of access that I might have to this evaluation form.

Signature of Parent/Guardian _____ Date _____

Gender <input type="radio"/> Male <input type="radio"/> Female Grade in September 2010 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 This student will be <input type="radio"/> Residential <input type="radio"/> Day Session student is attending <input type="radio"/> First <input type="radio"/> Second	COMPLETE THIS BOX
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Applicant Name

Last Name

First Name

Middle Initial

Homeschooled Students:

If you are being homeschooled, we ask that you submit two evaluation forms. The first should be completed by the parent/guardian homeschooling you. The second should be completed by a non-relative who knows you well, such as a coach, community service advisor, instructor or the like. **You may photocopy this form or call our office for an additional copy.**

TO BE FILLED OUT BY EVALUATOR

Upon completion of this form, please sign below and return the evaluation directly to Exploration Summer Programs.

Name of Evaluator _____ Evaluator's Email _____

School Name and Address _____ School Phone _____

Signature of Evaluator _____ Date _____

How long have you known the student? _____ Please indicate the student's current grade level: _____

In what capacity do you know the student? _____

Teachers, Guidance Counselors, and Principals:

The purpose of this evaluation is to help us better serve students while they are at Exploration during the summer. We strongly encourage you to be candid and thorough in your responses. Thank you for taking the time to complete this form. We appreciate your assistance.

About the Exploration Summer Programs

Exploration is a residential and day enrichment program for students who wish to explore academic disciplines as well as enhance their intellectual and social experiences. The Program is for students who are interested in learning. There are three divisions: the Senior Program at Yale University for students entering grades 10-12; the Intermediate Program at Wellesley College for students entering grades 8+9; and the Junior Program at St. Mark's School for students entering grades 4-7. We serve and welcome students with a broad range of abilities. All, however, should be enthusiastic about participating in a program of this kind.

Each year, Exploration welcomes students from more than 40 states and 40 countries. Students come from a wide variety of backgrounds, and Exploration offers a financial aid program to ensure that all socio-economic groups are represented. Students are often introduced to Exploration by their teachers. For further information, please visit our website at <www.expl.org> or contact us at 781.762.7400.

Name of Student _____

TO BE FILLED OUT BY EVALUATOR

Please rate the student in the categories listed below.

	EXCELLENT			AVERAGE			POOR	NOT ABLE TO JUDGE
	7	6	5	4	3	2	1	NA
Eagerness to Learn	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to Adjust to Change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Integrity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Concern for Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Emotional Maturity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Self-Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Ability to Work with Peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Relationship with Teachers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

I recommend this student for admission: Enthusiastically Strongly Mildly With Reservations Not at All

Please describe specifically any attitudes, abilities, or activities that are especially noteworthy. We are particularly interested in those that may affect classroom or residential life. If the student has been involved in a serious infraction of school/community rules or laws please explain.