

**UNIVERSITY OF HOUSTON – YBRA**  
**2011 GEOSCIENCES FIELD CAMP PROGRAM**

**APPLICATION**

Submit completed application along with: proof of insurance and a copy of your transcript to:

By mail: University of Houston  
 Department of Earth & Atmospheric Sciences  
 312 Science and Research Building 1  
 Houston, Texas 77204-5007  
 Attention: Tram Nguyen  
 By email: tnguye36@mail.uh.edu  
 By fax: (713) 748-7906

SESSION 1: Geology Field Camp (June 6 – July 10, 2011)  
 SESSION 2: Geology Field Camp (July 10 – Aug. 13, 2011)  
 SESSION 3: Geophysics Field Camp (July 31 – Aug. 11, 2011)

**APPLICATION DEADLINE: MARCH 1, 2011**

<b>1. Name: (last, first, middle)</b>	<b>2. Date of Birth: (mm/dd/yyyy)</b>	<b>3. Gender</b> <input type="checkbox"/> Female <input type="checkbox"/> Male
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<b>4. University/College of Current Enrollment:</b>	<b>5. Expected Graduation Date:</b>
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<b>6. Status (as of June 2011):</b> <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior <input type="checkbox"/> Graduate	<b>7. How will you travel to camp site?</b> <input type="checkbox"/> I will make my own travel arrangements <input type="checkbox"/> I will use UH-arranged transportation (additional fees required)
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<b>8. Mailing Address:</b>	<b>9. Telephone:</b>
	<b>10. Alternative Telephone:</b>

<b>11. Permanent Address: (if not same as above)</b>	<b>12. Emergency Contact:</b> Name: ..... Relationship:..... Telephone:.....
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<b>13. Email Address:</b>	<b>16. Cumulative GPA:</b>
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<b>14. Major:</b>	<b>15. If not "Geosciences" Major, reason for applying:</b>	<b>16. Cumulative GPA:</b>
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17. List courses you have taken or are taking in Earth Sciences (use a separate sheet if necessary)			18. Please indicate your plan to enroll for the 2011 Summer Program
Course Name	Grade	If no grade, completed by June 2011?	
			<input type="checkbox"/> Session I (Geology) <input type="checkbox"/> GEOL 3355 <input type="checkbox"/> GEOL 3360 <input type="checkbox"/> Session II (Geology) <input type="checkbox"/> GEOL 3355 <input type="checkbox"/> GEOL 3360 <input type="checkbox"/> Session III (Geophysics)

<b>19. Do you have a physical or medical condition that might limit your ability to participate in the often strenuous activities of a geology field course, such as hiking, climbing, camping, etc.? If your answer is "yes", you may be asked to obtain permission from your doctor allowing your participation in field camp program. Please see brochure or call (713) 743-3402 for more information</b>  <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>20. Provide the name of your insurance provider:</b>
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<b>Signature of faculty member from your institution recommending admission or an academic advisor, and who can verify the accuracy of all grades reported on this application</b>  ..... Date	<b>Signature of Applicant</b>  ..... Date
<b>Name:</b> _____ <b>Title:</b> _____	By signing, applicant certifies that all the above information is true and correct to the best of his or her knowledge.
<b>Email Address:</b> _____	

