



Non-Profit Org.  
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 Permit No. 170  
 Rolla, MO

# Nuclear Engineering Summer Camp 2016

June 26 – July 1

## Nuclear Engineering Camp

*A week long Introduction to Nuclear Engineering for: High school Juniors, Seniors, and College Freshman (as of Fall 2016)*

*will include:*

### Tours

- Missouri S&T Research & Training Reactor
- AmerenUE Callaway Nuclear Power Plant
- Phelps County Regional Medical Center

### Experiments

- Natural Radioactivity
- Reactor Operations
- Radiation Shielding
- Nuclear Forensics

Nuclear Engineering Department  
 222 Fulton Hall  
 301 W. 14th Street  
 Rolla, MO 65409-0170  
 Phone 573.341.4720  
 Fax 573.341.6309



**STUDENT APPLICATION**

**How Do I Apply?**

**Please remove and complete the attached application and mail it to:**

**Nuclear Engineering Camp 2016  
Missouri University of Science & Technology  
222 Fulton Hall  
301 W. 14<sup>th</sup> St.  
Rolla, MO 65409-0170**

**A registration fee of \$650 will also be required (refundable only to students not accepted to the camp). This fee covers room & board, and materials.**

**Application deadline is June 13th. Each camper must provide his/her own transportation to and from Rolla on the first and last day of camp.**

**Application Checklist**  
**Please provide:**

- Copy of high school transcript
- Copy of health insurance card
- 1x1 photograph (for identification purposes)
- Health Form
- Release of Liability Form
- General Permission Form
- \$650 registration fee (includes room and board)

Make check payable to *S&T NE Summer Camp*

Will refund if student is not accepted.

**Registration is at 4:00-6:00 p.m. on June 26.**

**For more information, please contact us at:**

**Phone: 573-341-4720  
Fax: 573-341-6309  
Email: nuclear@mst.edu  
Website: http://nuclear.mst.edu**

Name: \_\_\_\_\_ SSN \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Country of Citizenship: \_\_\_\_\_ Parent/Guardian's Name: \_\_\_\_\_

High School Name: \_\_\_\_\_

High School Address, City, State: \_\_\_\_\_

High School Graduation month/year: \_\_\_\_\_

Grade Point Average: \_\_\_\_\_ Point Scale: \_\_\_\_\_ Class Rank: \_\_\_\_\_ of \_\_\_\_\_ students.

T-shirt size: \_\_\_\_\_ Food preference (vegetarian, allergies, etc.) \_\_\_\_\_

How do you plan to travel? Car Bus Airplane Arrival Time \_\_\_\_\_

**RECOMMENDATION OF SCIENCE TEACHER, COUNSELOR, OR PRINCIPAL:**  
Understanding the nature and objectives of this Nuclear Engineering Summer program and the financial obligations being underwritten by the Nuclear Engineering Department of the Missouri University of Science & Technology, I recommend this candidate for your consideration.

Name, Title & Phone (*please print*): \_\_\_\_\_

Signature & Date: \_\_\_\_\_

**PERMISSION OF PARENT/GUARDIAN:** (for students under 18)

I hereby give my permission for my son/daughter to attend the Nuclear Engineering Camp and to participate in the scholastic activities and field trips that are planned.

Name (*please print*): \_\_\_\_\_

Signature & Date: \_\_\_\_\_