



Summer Computer Science Program 2020

2020 Application Form

Virtual Program August 3 - August 14

#DestinationCapital

(860) 906-5249
sfreeman@capitalcc.edu
capitalcc.edu/csprogram

Please email completed application to: sfreeman@capitalcc.edu

Please choose session:

Session 1: August 3 - 14
9 am - 12 pm

Session 2: August 3 - 14
1 pm - 4 pm

Student Information: *(all fields are required)*

Student First Name Student Middle Name Student Last Name

Birthdate Age Gender

Current School/Town of School

Parent/Guardian Information: *(all fields are required)*

Parent/Guardian Name Relationship

Street Address

City State Zip Code

Email Phone

Miscellaneous Information *(all fields are required)*

T-Shirt: (Choose the Adult T-Shirt Size for the Student)

Small Medium Large X-Large XX-Large



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Student Computer Background:

(required)

The following questions are used to identify the basic computer skill level of the applicant. **Parents/Guardians** - please work with your child to provide accurate answers to the following questions.

	YES	NO
My child has basic keyboarding and typing skills.	<input type="checkbox"/>	<input type="checkbox"/>
My child knows how to save and locate files stored on a computer.	<input type="checkbox"/>	<input type="checkbox"/>
My child has an email address and knows how to send/receive emails.	<input type="checkbox"/>	<input type="checkbox"/>
My child knows how to run computer applications like Microsoft Word.	<input type="checkbox"/>	<input type="checkbox"/>
My child knows how to use a web browser to go to a website.	<input type="checkbox"/>	<input type="checkbox"/>
My child knows how to use a web browser to perform a search on the Internet.	<input type="checkbox"/>	<input type="checkbox"/>

Family Income/Scholarships

(all fields are required)

Please specify your total family household income:

Less than \$25,000 \$25,000 to \$34,999 \$35,000 to \$49,999 \$50,000 to \$74,999 \$75,000 or more

Please specify the number of individuals in your household (Household Size): _____

	YES	NO
Scholarships may be available. Please specify if you are applying for a scholarship: Note: Proof of income verification may be required for scholarships.	<input type="checkbox"/>	<input type="checkbox"/>

Media Release Form

(all fields are required)

Capital Community College may videotape, photograph, and otherwise document students participating in the Summer Computer Science Programs. Any media (photographs, videos, quotes, interviews, etc.) of participating students will only be used for marketing and promotion of Capital Community College, and Capital Community College's Summer Computer Science Program. Media will only be used by authorized individuals at Capital Community College for non-profit educational and marketing purposes.

_____ I hereby authorize Capital Community College to use photographs, videos and/or quotes of my child for marketing purposes.

_____ I **DO NOT** authorize Capital Community College to use photographs, videos and/or quotes of my child for marketing purposes.

Students' First and Last Name

Signature of Parent/Guardian

Date