



Society for the Study of Reproduction (SSR 2015)



APPLICATION FOR ADMISSION IN OUTREACH ACTIVITY "A Day with a Scientist"

PLEASE PROVIDE THE FOLLOWING WITH YOUR APPLICATION:

- One letter of recommendation from a high school science teacher who is familiar with your academic performance and skills.
- Official transcript from your high school that confirms that your overall academic GPA is ≥ 3.30 and your science GPA ≥ 3.50 .

Personal and Contact Information

Last Name		First Name		Middle Name	
Physical Address		City	State		Zip Code
Current Mailing address (if different from physical)			Email address		
Name of Parent or Legal Guardian			Phone & Email address of Parent		

Educational Information

School Name and location (town)		Grade Level	GPA	Biology Grade
Name of Referee (ex., Science Teacher)		Email address of referee teacher		

PLEASE READ AND SIGN

I certify that all the information I have supplied in this application is true and complete. I understand that falsifying and/or giving incorrect information in this application may result in denial of the application process and participation in the SSR 2015 outreach activity. I promise to abide and respect the norms and regulations of the Society for the Study of Reproduction. I understand that completing and submitting this application does not guarantee my participation in the SSR 2015 outreach program.

Applicant's Signature

Date

I certify that I am authorizing the participation of my son/daughter in the SSR 2015 outreach activity. Also, I understand that the participation in this activity is voluntary, and I relieve the Society for the Study or Reproduction of all responsibility.

Parent or Legal Guardian's Signature

Date

PERSONAL STATEMENT

Please use the space provided. *In 500 words maximum*, please answer the following question:

If you grow up to become a biological scientist, which scientific problem would you work on and why?