



Application Guidelines and Form Society of American Military Engineers/ Engineering and Construction Camp

Your local SAME Post (chapter) is accepting nominations for qualified high school students interested in attending one of the SAME Engineering and Construction Camps.

To qualify for consideration, students must meet the following criteria:

- ❖ Student must be a U.S. Citizen.
- ❖ The student must have completed at least their freshman year of high school.
- ❖ The student must still be enrolled in school at the time of the camp.
- ❖ Be on a high school track that will provide a basis for attending an accredited engineering college or university (i.e., taking appropriate math and science courses).
- ❖ Have an **expressed intent to pursue a degree in architecture, engineering or a related field.**
- ❖ Have demonstrated leadership characteristics through participation in extra-curricular activities, sports, and/or community activities.
- ❖ Students must have a minimum GPA of 3.0 on a 4.0 GPA scale.
- ❖ Be physically fit and healthy (not have any physical limitations including, but not limited to the following: a requirement to take mandatory medication that requires special handling; sprained joints; or, neck, shoulder, or back injuries).
- ❖ Be of high moral character
- ❖ **FOR THE USAFA CAMP:**
 - ❖ Student must have an **expressed interest in applying to a Service Academy or ROTC Program (this does not include JROTC).**
 - ❖ If the student **has** completed the junior year of high school (rising senior), **they must provide proof of application for entry to a Service Academy or ROTC.** Rising seniors who have not met this qualification will not be considered for camp. Proof includes: A letter from the service academy or recruiter referring to the student's application.
- ❖ Students who have attended a SAME Engineering and Construction Camp prior to this year will not be eligible for the same camp.
- ❖ Students must be sponsored by a local SAME Post. Please see the Camp Application Process for details.

The total registration fee for the camp is \$550. The *student is responsible for paying half the registration fee, \$275*; checks should be made out to the sponsoring SAME Post. The sponsoring SAME Post will pay the remainder of the fee and will work with the student on transportation cost. (A Post may choose to restructure this payment plan based on special situations. Your local Post will tell you if this opportunity is available.)

DEADLINES:

- 1. STUDENTS** – Each Post sets its own deadline for receiving applications. Please check with your local Post for the correct application deadline. Plan to submit your application and supplemental materials 30 days prior to the Post's deadline.
- 2. POSTS** – All Posts **MUST** submit the completed application packet with the \$550 registration cost to the Camp Registrar **no later than: USAFA—April 24, 2009 and SEABEE—May 15, 2009.** See www.same.org/camps for instructions on submitting the information to the Camp Registrar.
- 3. IMPORTANT-- USAFA** arrival is at the Colorado Springs Airport between 12 p.m. -3 p.m. if possible on 26 June 09 and depart after 2:30 p.m. on 2 July 09. **SEABEE** arrival is at the Oxnard Ventura Airport on 19 July 09 between 11:00 a.m.-3:00 p.m. Students are expected to depart for home on 25 July 09 between 9:00 a.m. and 2:30 p.m. **Your sponsoring Post is responsible for arranging or approving your travel.**



APPLICATION FORM
Society of American Military Engineers/ Engineering and Construction Camp

Please complete all portions of this form and attach the emergency medical treatment form and medical release form. Please check with your local Post to determine the deadline for submitting this information.

I. APPLICANT INFORMATION *(Please fill in all fields. The gray boxes will expand as you type your answers.)*

- A. Camp you are applying for (please check one): USAFA Seabee
- B. Applicant's Full Name:
- C. Home Address:
- D. City, State, Zip:
- E. Home Telephone (xxx-xxx-xxxx):
- F. Student's E-mail Address:
- G. Age:
- H. Gender *(Please check one)*: Male Female
- I. Social Security Number (required due to base security):
- J. Citizenship:
- K. Are you a Military Dependent? *(Please check one)* Yes No
- L. Do you have special Dietary Considerations? (i.e. vegetarian, food allergies, etc.):
 Yes No

If yes, please specify:

- M. Do you have any medical conditions of which we should be aware? Yes No

If yes, please specify:

II. INFORMATION OF A PARENT OR GUARDIAN TO ACT AS AN EMERGENCY POINT OF CONTACT

- A. Name of Responsible Parent or Guardian:
- B. Work Phone Number:
- C. Cell Phone Number:
- D. Preferred E-mail

III. SPONSORING POST REPRESENTATIVE:

- A. Name of the SAME Post that you would like to sponsor you:
- B. Name of Post Point of Contact:
- C. Post POC's Home Telephone (xxx-xxx-xxxx):
- D. Post POC's Work Telephone (xxx-xxx-xxxx):
- E. Post POC's Preferred E-mail:

IV. APPLICANT'S SCHOOL INFORMATION

- A. Name of School Presently Attending:
- B. Anticipated Graduation Year:
- C. Cumulative GPA (as of last semester):



D. List math and science classes completed or classes you are currently enrolled in and the final or current grade status below, or attach a high school transcript to this application:

Course	Grade	AP or Honors?
a.		
b.		
c.		
d.		
e.		
f.		

E. I am interested in applying to a Service Academy or ROTC program (Please check one):

Service Academy ROTC Program Both

V. TOP THREE EXTRA-CURRICULAR ACTIVITIES, SPORTS AND COMMUNITY ACTIVITIES:

Identify your top three extra-curricular and community activities, and your role in the activity as it best describes you:

- a.
- b.
- c.

VI. SUPPLEMENTAL INFORMATION TO BE SUBMITTED WITH YOUR APPLICATION:

Please use the checklist below to make sure that you have included all of the following information. Incomplete applications will result in a delay of the review process.

- Emergency Notification and Medical Authorization Form signed by parent or guardian. (Download from www.same.org/camps)
- Medical Release form signed by your physician, stating that you are physically fit and/or indicating any known medical conditions that might limit participation in camp activities. (Download from www.same.org/camps) If you have received a recent HS Sports physical or related activity that required the student to be physically fit to compete or participate, you may send in a copy of that form.
- Photocopy of the front and back of Insurance ID card.
- A two sentence description of yourself.
- Proof that you have started the application process to a Service Academy or ROTC (only for rising seniors applying to the USAFA Camp).

By signing this application, I authorize that all the above information is correct and accurate. I also agree that I have met all the requirements listed for qualification.

APPLICANT'S SIGNATURE: _____ DATE: _____

SPONSOR'S SIGNATURE: _____ DATE: _____





MEDICAL RELEASE FORM
Society of American Military Engineers
Engineering & Construction Camp

A recent medical release form or physical fitness report completed for high school sports or another related activity requiring the student to be physically fit may be substituted for this form.

Otherwise, please have your physician fill out the information below and sign the form.

PHYSICIAN PLEASE NOTE - Students must meet the following criteria in order to attend camp:

- ❖ Be physically fit and healthy (i.e. not be dependent on medical care or treatment that would be difficult to administer in a field environment);
- ❖ Not have any physical limitations including, but not limited to the following: a requirement to take mandatory medication that requires special handling; sprained joints; or, neck, shoulder, or back injuries.

Student's Name (please print clearly): _____

The above patient is medically cleared to fully participate in all camp activities.

Physician's Name (please print clearly)

Physician's Signature

Date _____

STUDENTS – This signed form must accompany your application to attend camp.



EMERGENCY MEDICAL TREATMENT AUTHORIZATION FORM

SAME Engineering & Construction Camp

I, _____ do hereby appoint and authorize The Society of American Military Engineers (SAME) and the SAME Engineering and Construction Camp and its military or civilian designated representatives as my Attorney-in-Fact to obtain and consent to any and all medical/dental attention and hospital care and treatment, including major surgery, deemed necessary by an appropriate medical/dental provider selected by my Attorney-in-Fact for the health and well-being of my son/daughter, _____, who is attending the SAME Engineering and Construction Camp. See note below. This power shall terminate on _____ (Three days following the close of the camp is recommended.)

BY ITS NATURE, PARTICIPATION IN ENGINEERING AND CONSTRUCTION ACTIVITIES INCLUDES A RISK OF INJURY WHICH MAY RESULT IN SEVERITY FROM MINOR, TO LONG-TERM CATASTROPHIC INJURY, OR TO EVEN DEATH.

Although serious injuries are not common in supervised school engineering and construction programs, it is impossible to eliminate this risk. Participants can, and have the responsibility to, help reduce the chance of injury. **CAMPERS MUST OBEY ALL SAFETY RULES, REPORT ALL PHYSICAL PROBLEMS TO THE CAMP CADRE, AND INSPECT THEIR OWN EQUIPMENT DAILY.**

The SAME Engineering and Construction Camp Program does NOT screen applicants for illness, injury, allergies or other medical conditions that would prevent or limit the participation by the applicant in engineering, construction, athletic or outdoor programs.

It is the responsibility of the parents or guardian of each applicant to determine his or her fitness to participate in athletics or outdoor programs.

By signing this Permission Form, I acknowledge that I have read and understand the above warning, I do not know of any medical condition which would prevent or limit the participation of the applicant in athletics or outdoor programs.

I, on my own behalf and on behalf of this applicant, hereby release the United States Government, the Society of American Military Engineers, and the SAME Engineering and Construction Camp Program, its employees, agents, and representatives, from any financial responsibility or liability arising from injury to this applicant in connection with his or her participation in the summer sessions, including injury resulting from negligence (other than gross negligence) of employees, agents or other representatives of the SAME Engineering and Construction Camp.



Signed Date: _____

Parent or Legal Guardian

Address

City, State, Zip Code

Note: Air Force Academy and Seabee Camp non-emergency medical care will be provided by off-site civilian medical providers and clinics. Students needing emergency care will be treated in on-site emergency care facilities. If inpatient care is necessary, the Academy hospital is authorized to provide that only until the student is stabilized and can be moved to a local civilian hospital. The charge for an Emergency Room will be the responsibility of the parent/legal guardian. The inpatient charge is based on the patient's diagnosis. The Academy hospital will handle sending the bill to an insurance company if the necessary information is provided. Neither the Air Force nor the Attorney-In-Fact will be responsible for any bills incurred in a civilian medical facility.

Note: At the Seabee Camp all medical care will be provided by off-site civilian medical providers and clinics. Neither the Navy nor the Attorney-In-Fact will be responsible for any bills incurred in a civilian medical facility.