



STUDENT CONSENT

I, _____, agree that if I am invited to participate in the Herpetological Research Experience (HRE) and I elect to participate in the HRE, that I will follow all of the rules of Chestnut Ridge or Rockfish and all directions from all HRE instructors. I agree to be a positive participant who works hard to learn more about herpetology. I understand that if I violate Chestnut Ridge or Rockfish rules or compromise my, other students' or instructors' safety, or the safety of animals, that my parents/guardians will be notified and I may be asked to leave the HRE.

Student Signature: _____ Date: _____

HERPETOLOGICAL RESEARCH EXPERIENCE [HRE] PARENT/GUARDIAN SECTION PRIORITY WILL BE GIVEN TO APPLICATIONS RECEIVED BY MARCH 14, 2014

Name of person completing this section: _____
FIRST MIDDLE LAST

Relationship to Student: _____

Your Mailing/Contact Information:

Address: _____
ROUTE/HOUSE NUMBER/PO BOX STREET
CITY STATE ZIP CODE

Home Phone: () - Cell Phone: () - Email: _____

Please check which method of communication you prefer: Email Mail

Parent/Guardian Information:

Parent/Guardian #1 Name: _____
FIRST MIDDLE LAST

Address (if different from the address above): _____
ROUTE/HOUSE NUMBER/PO BOX STREET
CITY STATE ZIP CODE

Did you attend college? If yes, what college: _____

Work Phone: () - Cell Phone: () - Email: _____

Parent/Guardian #2 Name: _____
FIRST MIDDLE LAST

Address (if different from the address above): _____
ROUTE/HOUSE NUMBER/PO BOX STREET
CITY STATE ZIP CODE



Did you attend college? If yes, what college: _____

Work Phone: (____) ____ - ____ Cell Phone: (____) ____ - ____ Email: _____

What is the yearly income of your family?

- under \$25,000 \$25,000 – \$49,999 \$50,000 – \$74,999
 \$75,000 – \$99,999 \$100,000 – \$149,999 \$150,000 - \$199,999
 more than \$200,000

Additional Information:

In order to best meet the needs of all participants, please describe any special needs that your child has.

Please provide any other information that you think is important for the selection committee to consider in regards to your student's application for this program.

Parent/Guardian Consent:

My signature below indicates that I have read and understand all the information included in my student's application and that I support my student's application for this HRE.

Parent/Guardian Signature: _____ Date: _____



HERPETOLOGICAL RESEARCH EXPERIENCE [HRE] STUDENT BACKGROUND SECTION

1. List the high school science courses you have taken. (RISING 9TH GRADERS, LIST ONLY THE SCIENCE COURSES YOU ARE PLANNING TO TAKE IN 9TH GRADE.)

COURSE	TEACHER	FINAL GRADE
COURSE	TEACHER	FINAL GRADE
COURSE	TEACHER	FINAL GRADE
COURSE	TEACHER	FINAL GRADE
COURSE	TEACHER	FINAL GRADE
COURSE	TEACHER	FINAL GRADE

2. Activities and Leadership

List the activities you have been involved with in the last two years. Please also include leadership roles that you had in those activities:

School Activities:

Community and/or Volunteer Activities:

Work for pay:



3. About You:

Write a one page personal statement that explains why you wish to participate in this Herpetological Research Experience.

Note: This is a critically important part of the application, so we recommend spending time developing and editing your statement.



4. Recommendation:

Your application must include one letter of recommendation from either a teacher at your school, an employer or someone who knows you well (other than a relative). Your letter of recommendation can be mailed, faxed, or emailed by the person, who completes the recommendation. Please complete the following information about the person who wrote your letter of recommendation.

Name: _____
FIRST MIDDLE LAST

Address: _____
ROUTE/HOUSE NUMBER/PO BOX STREET

CITY STATE ZIP CODE

Relationship (check one): Teacher Employer Other: _____

Phone: (____) ____ - ____ Email: _____

Please mail, fax, or email this completed application and all accompanying documents to:

The Herp Project
School of Education Building
The University of North Carolina at Greensboro
1300 Spring Garden Street
Greensboro, NC 27402

Fax number: 336-334-4120; Attention: The Herp Project

Email address: herpproj@uncg.edu

Website: theherpproject.uncg.edu