

Chico State Intelligent Systems Lab Summer Robotics Camp 2004

Mentor Information

The Chico State Intelligent Systems Lab (ISL) has developed a week long, interactive Summer Robotics Camp to provide girls going into the 8th grade with the unique opportunity to learn more about science and math. This camp is designed to introduce these young women to the fields of Computer Science, Engineering, and Mechatronics through their learning, experimentation, building and use of robots. The ISL is looking for volunteer mentors to help with the camp, assisting the girls in their activities, supervising daily events, and overall acting as role models for participants.

QUALIFICATIONS:

- Applicants must be Chico State Students.
- Applicants must be able and willing to participate in camp in some part from June 14th through June 18th, 9:00am to 3:00pm daily.
- Applicants must be responsible and dependable, able to take on challenges, and model good behavior and enthusiasm for Summer Robotics Camp participants.

DATES:

Monday, June 14th, 2004 through Friday, June 18th, 2004 from 9:00am to 3:00pm daily.

LOCATION:

California State University, Chico campus. Mentors and staff will meet in front of the O'Connell Technology Center, located on the corner of Warner and West $\mathbf{1}^{\text{st}}$ Street.

DEADLINE:

Completed applications must be received by April 1^{st} , 2004. Mentors should receive notification of acceptance by April 15^{th} , 2004.

CONTACT INFO:

The Chico State Intelligent Systems Lab welcomes any questions or concerns about our Summer Robotics Camp. Please contact us at csuc_isl@yahoo.com or visit the camp's website at www.ecst.csuchico.edu/isl/SummerCamp.html

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Acquisition of robotics equipment for an Intelligent Systems Laboratory



Chico State Intelligent Systems Lab Summer Robotics Camp 2004

Mentor Application Form

Please print legibly in ink or type.

PART 1: GENERAL INFORMATION -To be completed	by appl	icant
Name: Last First		M.I.
Mailing Address: Number and Street	tment #	
City: Zip Code:	imeni #	
Phone: Gender: F M		
Email:		
What school do you currently attend?Grade Level?		
What is your major/intended major?		
What is your current cumulative grade point average (GPA)?		
What are the highest levels of math and science that you have completed with a passing grade?		
What days and times are you available to participate as a camp mentor? Monday Tuesday Wednesday Thursday	Fri	—— day
Have you ever been convicted of a felony? Yes No		
If yes, please explain:		
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I understand and agree that:

- 1. I agree to participate in the ISL Summer Robotics Camp at CSU, Chico from Monday, June 14th, 2004 through Friday, June 18th, 2004 from 9:00am to 3:00pm daily.
- 2. I will arrive on time and actively participate in all scheduled activities such as classes, workshops, laboratories, and recreational activities.
- 3. If I cannot attend the Summer Robotics Camp on a particular day, I will contact the ISL staff members to inform them ahead of time of my absence.
- 4. I will work with the staff of the Summer Robotic Camp in order to best meet the participants' needs.
- 5. I will abide by the rules and regulations of the Summer Robotics Camp and California State University, Chico. I understand that my failure to abide by these rules or any behavior problems will result in my immediate dismissal from the program.
- 6. I will be responsible for any ISL items being lost, stolen or damaged due to my negligence.
- 7. The Summer Robotics Camp and California State University, Chico are not responsible for any items of mine being lost, stolen or damaged.
- 8. The ISL may use pictures of me participating in Summer Robotics Camp activities for ISL website content and CSUC promotional purposes.
- 9. The ISL Summer Robotics Camp, California State University, Chico, staff and owners of properties used for the program activities shall not be held responsible for any injuries I endure during the period of participation as a mentor in the program.
- 10. All of the information I have provided in this application is honest and correct to the best of my knowledge.

Applicant's Signature	Date	

PART 3: AUTHORIZATION TO TREAT

-To be completed by applicant

I, the undersigned, do herby authorize and consent to any X-ray examination, anesthetic, medical or surgical diagnosis or treatment, and emergency hospital care, which is deemed advisable by and if rendered under the general or special supervision of any member of the medical staff or emergency room staff licensed under the provisions of the Medicine Practice Act and on the staff of any acute general hospital holding a current license to operate a hospital from the State of California Department of Health. It is understood that effort shall be made to contact the emergency contact prior to rendering treatment to the undersigned, but that any of the above treatment will not be withheld if the emergency contact cannot be reached. This authorization is given pursuant to provisions of Section 25.8 of the Civil Code of California.

I further agree not to hold the ISL Summer Robotics Camp liable for the medical aid rendered and will reimburse the ISL Summer Robotics Camp for any medical or other expenses incurred.

Applicant's Signature	Date

PART	4:	MFN	SOTI	SUR	VFV

-To be completed by applicant

The following information will be important for program officials to know in the event that you are selected. The information that you provide will not affect the evaluation of your application. Please provide honest responses.
What is your preferred adult, unisex, T-shirt size?
How would you rate your level of computer skills? None Novice Intermediate Advanced
How would you rate your level of robotic knowledge? None Novice Intermediate Advanced
Do you have any physical or medical condition/needs of which the program staff should be aware or that can restrict your participation in certain type of activities? If yes, please describe:
Do you have any special food restrictions or preferences (i.e. allergies, vegetarianism, religious prohibitions, etc.)? Yes No If yes, please describe:
In case of emergency, contact:
Relationship:
COMPLETED APPLICATION -Please read carefully
All parts of this application must be completed and mailed together or the application will be considered incomplete. Incomplete or late applications will not be processed. All information provided will remain

confidential.

Mail completed application to: ISL Summer Robotics Camp

Department of Computer Science California State University Chico

Chico, CA 95929-0410

Completed applications must be received by

Thursday, April 1, 2004