



Preparing Women for Mathematical Modeling in Montana

 The Montana Learning Center at Canyon Ferry Lake 
7653 Canyon Ferry Road • Helena, MT 59602-9788
(406) 475-3638 • fax 475-3871
executivedirector@MontanaLearning.org

Program Director: Marie Vanisko mvanisko@carroll.edu (406-422-5842)
Program Co-Director: Richard Seitz at Helena High rseitz@helena.k12.mt.us

Application Instructions for 2010 Academy

This program is **FREE** and has a limit of 24 participants, so apply early.



Eligibility Requirements:

You must be a young woman who has completed Math 1 or Algebra I by the end of spring semester 2010 and you must be entering the 10th, 11th, or 12th grade in the upcoming academic year.

Complete the Application Form and Attach Essay

You and your parents must fill out the application form on the two pages that follow. Then write a one-page essay telling us about your experiences in mathematics, including the course(s) you have had in high school. Tell us why you would like to participate in the program.

Send these to

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Required Letter of Support from a High School Mathematics Teacher

Ask one of your high school mathematics teachers to write a short letter supporting your participation in the program, Preparing Women for Mathematical Modeling in Montana (PWMMM). They may mail, fax, or email their letter to the above address.

For additional information, contact the project director or co-director listed above

Formal Application Form on Next Two Pages

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Summer 2010 Registration Form

- This form **MUST** be completed by applicant
- Please print clearly using **BLACK** or **BLUE ink pen**.
- Both parent and student signatures are required for a completed application.

Name: _____ Today's Date: _____

Parent/Guardian (Name): _____

Mailing Address: _____
Street

City State ZIP

Home Phone: _____ Student's Date of Birth: _____

Cell Phone (if you have one): _____

E-mail Address (print clearly): _____

T-shirt Size: S M L XL 2XL

When did you complete Algebra I? _____

Grade Level (Fall '2010): _____ Math Class (Fall '2010): _____

School Name: _____

Mathematics Teacher's Name Who Is Writing Letter of Support:

Continued on next page

To be Completed by Parent/Guardian

Indicate names and telephone numbers of two adults who may be contacted about your daughter's performance in the Preparing Women for Mathematical Modeling in Montana Academy (PWMMM). (Required)

<u>Name</u>	<u>Address</u>	<u>Phone</u>	<u>Relationship</u>
1.	_____	_____	_____
2.	_____	_____	_____

Consent to Participate In PWMM Academy

- Miss _____ has my permission for participation in the PWMMM Academy offered through the Montana Learning Center, Helena School District #1, and ExplorationWorks. I give permission to authorized personnel to make a record of my daughter's activities (e.g. video-tape, audio-tape, photos, and comments) while engaged in the program; I understand that the material so obtained may be used for publicity, education, and other training purposes benefiting the program.
- I understand that my daughter must abide by the dress code in order to participate in the program.
- I understand that my daughter will be dismissed if she breaches any of the rules.
- I assume full responsibility for any damage to the University property brought about by my daughter.

Parent/Guardian Signature: _____ **Date:** _____
(Required)

- As a participant of the PWMM Academy, I will abide by the rules.

Student Signature: _____ **Date:** _____
(Required)