

School Permission Form

**47th Annual
Junior Science, Engineering, and Humanities Symposium (JSEHS)
University of Florida
January 24-26, 2010**

Please type or print all information neatly.
Basic form may be photocopied.
Submitted form must bear original signatures.

This form can be e-mailed to JSEHS@cpet.ufl.edu BUT the second page must be mailed with Signatures

****This form is due January 8, 2010**

School Information

School: _____
Name of School

Address: _____
Num ber and Street C ity S tate Zip

Chaperone's Name: _____ Principal: _____
Sa lutation First Name Middle Name Last Name

Chaperone's E-Mail: _____ Science Chair: _____
Sa lutation First Name Middle Name Last Name

Phone: (_____) _____ Math Chair: _____
School Phone Salutation First Name Middle Name Last Name

Fax: (_____) _____ Guidance Chair: _____
School Fax Salutation First Name Middle Name Last Name

Payment Information

_____ Participating Teachers @ \$210 each _____ *Fee Waiver for 11-12th grade Speakers and Advisors _____

_____ Participating Students @ \$185 each _____ Amount of Check or Money Order Enclosed _____

_____ Purchase Order Number _____ Amount of Purchase Order Enclosed _____

To tal Due _____ **R emaining Balance Due _____

* **Include total amount of participant fees which have been waived** (e.g., 11-12th grade student speakers, and sponsoring
** **Please indicate how and when the balance due will be remitted.** teachers or those chaperoning ten or more students).

School Contact Person Responsible for Fiscal Matters:

Name: _____ Phone: _____ Fax: _____

Fees and Payments

1. Make all checks payable to: **University of Florida.**
2. All reservations for the JSEHS must be accompanied by full payment or purchase order for the group from the participating school, unless other arrangements have been made.
3. Please submit, with the payment or purchase order, the names for whom the payment is being made. Payments received without this identification may be returned.
4. Please send checks, purchase orders, or money orders -- no cash. Either individual or pooled group payments are acceptable. All forms are to be completed, notarized as necessary, and returned to the CPET office no later than **January 8, 2010.** Please contact the CPET office if there will be any difficulty meeting this deadline.
5. Fees cover two nights at the hotel (teachers in double occupancy and students in quadruple occupancy), five meals (Monday breakfast through Tuesday lunch), insurance, and materials and related program expenses except transportation to and from Gainesville. (Sunday dinner is not provided.)

Substitution Guidelines are as Follows

1. Substitution is made with the prior knowledge and consent of the JSEHS Director;
2. Substitute is of the same gender as the original representative;
3. Substitute after January 15 will accept the same lab assignments as those made for the original representative; and
4. All forms (Student Registration Form or Teacher Registration Form) for the substitute are completed, notarized as necessary, and received prior to the beginning of the JSEHS.

Restrictions and Refunds

1. There will be no charge for substituting a participant according to the stated substitution guidelines if the request is received by **5:00 PM, January 15, 2010.** Substitutions made after January 15 will be assessed a late registration fee of \$25.00 to cover additional processing costs. The CPET must be informed of all substitutions prior to their arrival at the JSEHS. A substitution of the opposite gender is allowed if hotel space is available. Any additional hotel charges incurred as a result of this substitution must be borne by the substituting party.
2. **No refunds can be made for cancellations after January 15, 2010.**
3. No refunds will be issued to participants who fail to arrive or to attend the entire meeting.

Teachers or Other Adult Sponsors Attending

| Name | Gender | Department | Payment (Check or P.O.) |
|----------|---------------------|------------|-------------------------|
| 1. _____ | [] Male [] Female | _____ | _____ |
| 2. _____ | [] Male [] Female | _____ | _____ |

Students Attending

| Name | Gender | Grade | Student Speaker | Payment (Check or P.O.) |
|-----------|---------------------|-------|-----------------|-------------------------|
| 1. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 2. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 3. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 4. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 5. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 6. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 7. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 8. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 9. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |
| 10. _____ | [] Male [] Female | _____ | [] Yes [] No | _____ |

Please list additional participants (teachers and students) and payment info on a separate sheet.

General Participant Information

Name of Adult in charge of group: _____

How will your group travel to Gainesville? [] Car [] Van [] Mini-Bus [] School Bus [] Other _____

How many parking decals will you require? _____

If your group is traveling by bus, would you like for us to make arrangements for the bus driver's lodging? [] Yes [] No

If yes, please give the bus driver's name and gender: _____ [] Male [] Female

Information regarding costs will be sent after the request is received.

School Permission

The students and teachers listed on this form, and any supplemental sheets attached to this form, are released from class as necessary to participate in the events of the 47th Annual Junior Science, Engineering, and Humanities Symposium at the University of Florida, Gainesville, January 24-26, 2010.

We understand that it is the responsibility of the adult sponsor(s) to monitor the conduct of the students in his/her group. In the event that a participant does not abide by the rules of conduct established by the JSEHS and/or his/her school, that participant may be asked to leave the JSEHS immediately at the expense of his/her parent or guardian.

Principal's Signature

Adult Chaperone's Signature

**Mail to: 47th Annual JSEHS, Center for Precollegiate Education and Training
PO Box 112010, Yon Hall Room 334, Gainesville, FL 32611-2010**