HENDERSON STATE UNIVERSITY

SUMMER INSTITUTE STUDENT INFORMATION SHEET

Sunday, July 16-Thursday, July 20, 2023

Application deadline for ALL applications is Friday, June 16, 2023

ELIGIBILITY CRITERIA

- Applicant must have a minimum 2.25 GPA.
- > Applicant must have taken the ACT/SAT Test at least once and submit their scores.
- > Applicant must submit 1 letter of recommendations of which must be from classroom teachers and/or academic counselors.
- > \$125.00 participation fee

SECTION 1: PERSONAL DATA	PLEASE PRINT OR TYPE
Student's Name	
School	
Classification	Birth date
() Male () Female	T-Shirt Size
Email address	GPA
Address	Phone ()
City State_	Zip
Student plans to attend	University/College/Vocational
	reer?
Has either of your parents completed a four year	

SECTION 2: ACHIEVEMENTS

Describe your achievements and financial needs using the categories below. If you need more space, please use additional sheets of paper.

- 1. Academic Awards, Honors & Achievements
- 2. Community Service/Volunteer Work
- 3. Extracurricular Activities
- 4. Leadership Ability & Achievements

SECTION 3: WRITTEN COMMUNICATION SKILLS

On a separate sheet, type a paragraph on, "The importance of a college, education."

SECTION 4: PLEASE SUBMIT A COPY OF YOUR OFFICIAL TRANSCRIPT.

Applicant's Signature	Date	()_ Phone Number
Signature of Counselor or School Official	Date	()Phone Number
Signature of Parent/Guardian	Date	()_ Phone Number

SECTION 5: ACADEMIC RECOMMENDATION LETTERS

Please include two letters of recommendations

To return the application or for additional information, you may contact the Summer Institute Coordinators' offices:

Wanda Harris 870-230-5406 <u>harrisw@hsu.edu</u> 1100 Henderson Street HSU Box 7603 Arkadelphia, AR 71999-0001

Students will be notified if they are selected to participate.

GUIDELINES FOR SUMMER INSTITUTE PARTICIPANTS

I,		, agree to the following guidelines:
	1.	Participants will be actively involved in ALL activities unless a medical excuse is provided.
	2.	Participants will eat breakfast, lunch and dinner – these meals are not optional.
	3.	Participants will be on time and in attendance for all sessions.
	4.	Participants will be respectful to all presenters during each session. Sleeping and talking will not be tolerated.
	5.	Visitors of the opposite sex are NOT allowed in dorm rooms at any time. Members of the opposite sex may visit in the lobby of the residence hall.
	6.	Participants must be in their rooms and lights out no later than 12:00 midnight. Room checks will be conducted.
	7.	If participants drive to Henderson State University, vehicle keys must be turned in to the program director. In case of an emergency requiring the use of a vehicle, please contact the program director. All contact information for the program director will be given upon your arrival.
	8.	Participants are to conduct themselves as young ladies and gentlemen at all times.
	9.	Participants must be dressed appropriately at all times. Males: No sagging pants, head rags or caps etc. Females: No short skirts or shorts, halter tops or excessively tight or revealing clothing will be allowed at any time.
	10.	Participants are urged to bring as little electronic equipment as possible to campus. TV's and gaming devices are prohibited. All cell phones, paging devices, IPods and mp3 players etc. must be left in participants rooms at all times. Participants are responsible for locking their rooms at all times and securing all of their personal property while they are in attendance. Henderson State University will not be responsible for any lost or stolen personal property.
		rument gives permission for the above-named student to participate in all activities for prospective college students y 16, 2023 to July 20, 2023.
		on is also granted for the Summer Institute staff members and university personnel to transport the above-named of and from activities upon his/her arrival at Henderson State University.
	result in engaged claim ag	are and understand the guidelines of Summer Institute and realize that failure to comply with these guidelines will immediate expulsion from the program. I have been well advised of the nature of the activities my child will be in during the Summer Institute, and I acknowledge and understand that accidents happen. I knowingly waive any ainst Henderson State University for injuries my child may suffer whether simple or gross negligence, other than sing from willful acts of the sponsors, counselors, or agents of the University from liability whatsoever for such
	I certify	that I am legally responsible for the student for whom this release is submitted.
	Parent/G	Suardian Signature:
	Printed 1	Name:
	Relation	to Participant:
	Participa	ants Signature: Date
	Printed 1	Name:

Home Phone:_____ Cell Phone:____

Summer Institute Medication Consent Form

Medications may only be administered by an employee of the Summer Institute as directed by the Program Director and only if this medication consent form is fully completed. Medications will NOT be administered to the camper if form is NOT complete.

The following medications will be administered as needed ONLY if initialed by parent/guardian.

<u>Initial</u>	Medication Tylenol 325 mg (Adult)	<u>Dose</u> 2 tabs	<u>Frequency</u> every 4-6 hrs.
	Ibuprofen (Motrin) 200 mg	tabs	every 4-6 hrs.
	Cough drops	1 drop	every hour
	Benadryl 25 mg	caps	every 6 hrs.
	Cortisone Cream	Topical	every 4-6 hrs.
	Triple Antibiotic Ointment	Topical	as needed
	Alamag Plus	2 tabs	every 4-6 hrs.
	Meclizine 25 mg	1-2 tabs	daily
	Loperamide 2 mg	2 initially, then 1 af	eter next loose BM
	Other		
Food	print any known allergies:		
	ings		
Other			
competel every effort withowever, and representatives I agree to the MEDICATION	Inistory/medication consent form is correct Y in order for my child to receive treatm ill be made to contact a parent/guardian partner in the situation requires immediate emergents of the camp to obtain emergency treatm release of any records necessary for troop, PRESCRIPTIONS: Law requires parental authorization to a	ent at the HSU camp. I understand prior to treatment If a parent or gracy attention as determined by came the for my child as deemed necess the eatment or referral of the minor	that in the case of an emergency, uardian cannot be reached, up staff, I hereby authorize sary by representatives of the camp child.
prescribed med	dication MUST be in its original container, name of medication, and directions for	er with the pharmacy label showing	
I authorize th	e camp health supervisor to administe	r to my child any prescribed med	dications being brought to camp.
non-prescription	RIPTION MEDICINES: I authorize the on medications that I have initialed above ons not initialed by parent/guardian w	e in brand name or generic form if	necessary for camper's comfort.
I certify that	I am legally responsible for the student	t for whom this release is submit	ted.
Parent Signatu	ire	Date	
Print Name			

COVENANT NOT TO SUE AND AGREEMENT TO HOLD HARMLESS

SUMMER INSTITUTE

In consideration for receiving permission for my child to participate in the Henderson State University Summer Institute 2022, I, the undersigned, execute this Covenant Not to Sue and Agreement to Hold Harmless voluntarily to bind myself, my child, my family and heirs. I hereby RELEASE, WAIVE, DISCHARGE, AND COVENANT NOT TO SUE, AND AGREE TO HOLD HARMLESS for any and all purposes Henderson State University, the Board of Trustees of Henderson State University, and their officers, servants, agents, volunteers, or employees (herein referred to as RELEASEES) FROM ANY AND ALL LIABILITIES, CLAIMS, DEMANDS, OR INJURY, INCLUDING DEATH, that may be sustained by my child while he or she is a participant in the Summer Institute, while traveling to or from the Summer Institute or while on the premises owned or leased by RELEASEES, including injuries sustained as a result of the negligence of RELEASEES. I know of no medical reason why my child should not participate in the Summer Institute.

I am fully aware that there are inherent risks involved with participating in the Summer Institute, including but not limited to property damage and serious personal injury to me and my child, including death, and I choose to voluntarily allow my child to participate in the activity with full knowledge that doing so may be hazardous to my child and his/her/my property. I VOLUNTARILY ASSUME FULL RESPONSIBILITY FOR ANY RISKS OF LOSS, PROPERTY DAMAGE OR PERSONAL INJURY, INCLUDING DEATH that may be sustained by my child as a result of participating including injuries sustained as a result of the negligence of the releases.

I am fully aware of the following:

- **1.** That participation in Summer Institute may subject my child to potentially hazardous activities including but not limited to automobile travel and overnight accommodations in university residence halls.
- **2.** I give permission for my child to participate in any trips planned and taken as a part of the Summer Institute I understand and agree that these trips may involve transportation by automobile.
- **3.** I acknowledge that the use of alcohol or drugs is strictly prohibited during Summer Institute. I understand and agree that my child will not use or be under the influence of alcohol or any drug while participating in Summer Institute. I agree that my child's failure to comply will result in his/her being dismissed from the Summer Institute immediately. In the event that my child is dismissed from Summer Institute, I will be responsible for arranging my child's transportation home at my own expense.
- **4.** I have reviewed the tentative schedule for Summer Institute. The Releasees have provided me with sufficient information regarding the activities my child will be engaged in during the Summer Institute.
- **5.** I understand that Henderson State University and the other releasees may not maintain any insurance policy covering any circumstance arising from my child's participation in the Summer Institute. As such, I am aware that I should review my child's personal insurance coverage.
- **6.** If my child should suffer an injury or illness while at the Summer Institute, I authorize the Releasees to use their discretion to transport or to have the minor child transported to a medical facility and obtain medical treatment. I understand that I will be financially and legally responsible for any medical care provided to my child and will hold the Releasees harmless.

It is my express intent that this Covenant Not to Sue and Agreement to Hold Harmless shall bind my child, the members of my child's family, my family and spouse, if I am alive, and my and my child's heirs, assigns and personal representatives, if I or my child is deceased, and shall be governed by the laws of the State of Arkansas. Nothing in this Covenant Not to Sue and Agreement to Hold Harmless shall be deemed to waive the sovereign immunity of Henderson State University. Pursuant to A.C.A. §19-10-204, the Arkansas State Claims

Commission shall have jurisdiction over any dispute regarding my participation in this activity and this Covenant Not to Sue and Agreement to Hold Harmless.

Summer Institute (continued)

I agree that I will pick up or arrange for transportation for my child at the end of the scheduled program for Summer Institute as Releasees will PROVIDE NO SUPERVISION OF STUDENTS AFTER THE SUMMER INSTITUTE dismisses.

I acknowledge and agree that the Releasees reserve the right to dismiss any student who fails to comply with the Summer Institute Guidelines, the instructions of the Program Director, or other representative of the Releasees. Program disruption or disrespectful behavior is grounds for dismissal at any time.

I grant permission to the Releasees to release personally identifiable information about my child in order to publicize his or her participation in the Summer Institute and to otherwise promote the Summer Institute. I grant the Releasees the unrestricted right and legal permission to use, re-use, publish, and republish any image, photograph and/or likenesses of my child, in whole or in part, in any and all media for any lawful purpose.

I certify that I am legally responsible for the participant for whom this release is submitted. In signing this Covenant Not to Sue and Agreement to Hold Harmless, I acknowledge and represent that I have read the foregoing Covenant Not to Sue and Agreement to Hold Harmless, I have had the opportunity to ask questions, I understand it and sign it voluntarily as my own free act and deed; no oral representations, statements, or inducements apart from the foregoing agreement that has been reduced to writing have been made. I execute this document for full, adequate and complete consideration fully intending to be bound by the same, now and in the future.

SIGNED this day of, 23	_•
Parent/Guardian Signature:	
Relationship to Participant:	
Parent/Guardian Home Phone:	Mobile Phone:
Participant Signature:	
Printed Name:	
In the event we cannot reach you in an emerge	ency, please provide another trusted contact person:
Emergency contact name:	
Relationship to student:	
Mobile phone number:	Home phone numbers

Please return pages 1-6 of the Summer Institute application packet complete with all signatures and requested documents by June 16, 2023. You may keep pages 7 and 8 for your reference.

Mail to: Ms. Wanda Harris Henderson State University HSU Box 7603 Arkadelphia, AR 71999-0001

Sample

Summer Institute Schedule

The following is a sample schedule to give you an idea of the activities in which the student will be involved. A confirmed schedule for this year will be posted on the website and available prior to arrival by postal or electronic mail upon request.

Summer Institute Sample Schedule

Sunday
Registration & Move-in 5:00pm-6:00pm
Parent/Student/Counselors Orientation 6:00pm
Ice Breakers & Team Builders 7:00pm-8:00pm
Movie & Pizza 8:30pm-Until
Monday
BREAKFAST 8:00am-8:50am
Opening Session 9:00am-9:50am
Effective Communication 10:00am-10:50am
Conflict Resolution 11:00am-11:50
LUNCH 12-12:50
Video Production 1:00pm-1:50pm
Academic Strengthening 2:00pm-4:00pm
HSU Campus Tour 4:00pm-4:50pm
DINNER 5:00pm-6:00pm
Discuss Crown Project 6:20nm 7:30nm

Discuss Group Project 6:30pm-7:30pm

Participants are divided into teams. Each team will complete a project that reinforces relational concepts learned in the sessions. The final projects will be presented at the closing ceremony.

EVENING ACTIVITIES

Movie/games/swimming 7:30pm-until

Tuesday

BREAKFAST 8:00am-8:50am

Video Production 9:00am-9:50am

Campus Involvement 10:00am-10:50am

"Show Me the Money" - Financial Aid Tips 11:00am-11:50am

LUNCH 12:00pm-12:50pm

Health and Wellness 1:00pm-1:50pm

Academic Strengthening 2:00pm-2:50pm

Expectations of a College Professor 3:00pm-3:50pm

College Admissions 4:00pm-4:50pm

Cook out on the grounds 5:00 pm-7:30pm

Group Project and game activities in the dorm 7:30pm-until

Wednesday

BREAKFAST 8:00am-8:50am

Career Path Explorations 9:00am-9:50am

Study Skills 10:00am-10:50am

Academic Strengthening 11:00am-11:50am

LUNCH 12:00pm-12:50pm

Evening out in Little Rock 1:00pm until 8:00pm

Cultural and social educational activities

Group Project Completion 8:00pm-until

Thursday Closing Day

BREAKFAST 8:00am-8:50am

Compass Test 9:00am-11:00am

Dress for closing ceremony 11:00am-11:50pm

Parents' / Participants' Reception 12:00pm-12:30pm

Closing Ceremony 12:30pm-1:30pm