

DAPCEP Program Application

Office Use Only

Name	<p>* Required Fields. Please Print Clearly, One Letter per Box.</p> <p>*Last Name <input type="text"/></p> <p>*First Name <input type="text"/></p> <p>*Middle Initial <input type="text"/></p> <p>*Date of Birth (01/01/2009) <input type="text"/> / <input type="text"/> / <input type="text"/></p>
Course Selection	<p>*Course Code <input type="text"/></p> <p>*Course Name <input type="text"/></p> <p>*Course Location <input type="text"/></p> <p>If you are not accepted in the course, would you like to be considered for other courses for which you are qualified?</p> <p>(Check One Box) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>*Course Code for Second Choice <input type="text"/></p> <p>*Course Name for Second Choice <input type="text"/></p> <p>*Course Location for Second Choice <input type="text"/></p> <p>Major academic/career interests <input type="text"/></p>
Academic Information	<p>*Current School Name <input type="text"/></p> <p>*City of School <input type="text"/></p> <p>Student ID (from report card/transcript) <input type="text"/></p> <p>*Current Grade Level <input type="text"/></p> <p>*What type of school do you attend? <input type="checkbox"/> Detroit Public School <input type="checkbox"/> Charter School</p> <p>(Check One Box) <input type="checkbox"/> Private School <input type="checkbox"/> Home Schooled</p> <p>*Overall GPA (on 4.0 Scale) <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Example <input type="text"/> 3 . <input type="text"/> 2 <input type="text"/> 1</p> <p>*Other Grading Scale or Narrative: <input type="text"/></p> <p>*Last Science Course Name <input type="text"/></p> <p>*Science Letter Grade (Ex:A+) <input type="text"/></p> <p>*Last Math Course Name <input type="text"/></p> <p>*Math Letter Grade (Ex:A+) <input type="text"/></p>
Previous Experience	<p>Course Name <input type="text"/></p> <p>Location <input type="text"/></p> <p>Course Name <input type="text"/></p> <p>Location <input type="text"/></p>
<p>Note: A completed DAPCEP application has the following components:</p> <ul style="list-style-type: none"> - Completed DAPCEP application signed by both the Students and Parent/Guardian - Completed & Signed Code of Conduct & Informed Consent Form - Students currently in grades 4th through 9th must submit a "copy" of his/her last Report Card - Students currently in grades 10th through 12th must submit a "copy" of his/her Transcript 	

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Office Use Only

Applicant Information	<p>* Required Fields. Please Print Clearly, One Letter per Box.</p> <p>*Date of Birth (01/01/2009) <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Last Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*First Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Middle Initial <input type="text"/></p> <p>*Address Line 1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Address Line 2 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*City <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*State <input type="text"/> <input type="text"/></p> <p>*Zip <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>How long have you lived at this address? <input type="text"/> <input type="text"/> Years <input type="text"/> <input type="text"/> Months</p>
	<p>Student Email <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Student Home Phone <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Student Cell Phone <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
Parent/Guardian & Emergency Contact Information	<p>*Last Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*First Name <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Middle Initial <input type="text"/></p> <p>*Address Line 1 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Address Line 2 <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*City <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*State <input type="text"/> <input type="text"/></p> <p>*Zip <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Parent/Guardian Email <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Parent/Guardian Home Phone <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Parent/Guardian Work Phone <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Parent/Guardian Cell Phone <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Emergency Contact <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Relationship <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Phone Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Emergency Cell Phone Number <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>
	<p>*Parent/Guardian Signature</p> <p style="text-align: right;">Print <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>*Student Signature</p> <p style="text-align: right;">Print <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p>

Participant Code of Conduct & Required Demographic Information

Participant Code of Conduct

To All DAPCEP Participants:

- It is expected that all DAPCEP Program participants adhere to the basic rules that govern the program.
- Participants must exhibit a **positive attitude toward learning** at all times.
- Participants must arrive **on time** and be **prepared** for class.
- In case of an absence, the participant must bring a **written explanation, signed by a parent/guardian**.
- Participants must follow **the directives** of teachers and program administrators.
- Participants must **complete all assignments on time**.
- **Inappropriate dress is not acceptable** (i.e. Healties, midriff tops, sagging pants, etc.).
- **Hats, head scarves, or “doo rags” are not to be worn** during class time.
- Personal **audio and video equipment (MP3 Players, iPods, PSP, Game Boys, etc.) are strictly prohibited**.
- Participants must **not eat or drink** during class.
- Participants must be **picked up on time after class**. This means within 15 minutes after class has ended.
- Use of cell phones is not acceptable. Phones should be turned off and kept out of sight; this includes lunchtime! Telephones may be available for the students to use. Ask any program staff member or teacher if a telephone is available.
- Must be **present at the last session** to receive a certificate.

Those not complying with the rules are subject to dismissal from the program and may be excluded from future DAPCEP classes.

The DAPCEP Program reserves the right to terminate participation for any student when it is deemed to be in the best interest of either the student or the program. DAPCEP and the program staff reserve the exclusive right to establish and determine the standards of conduct, behavior, and performance of participants engaging in the program and to require compliance with such standards as a condition of participation in the program. Students who do not follow these rules, or engage in dangerous or inappropriate behavior, will be dismissed from the program. Examples of inappropriate behavior include such things as causing disruptions in class, the use of profane language, and the repeated violation of minor rules.

DAPCEP requires that participants read these regulations with your parents/guardians. Your signatures indicate that you understand and accept them as part of your participation in the DAPCEP Programs.

Print Participant's Name

Sign Participant's Name

Date

Print Parent/Guardian's Name

Sign Parent/Guardian's Name

Date

Participant Code of Conduct & Required Demographic Information

Required Demographic Information

The following information is for data purposes only and is a required condition of DAPCEP program support/funding. The collected data will remain confidential. Please check all that apply to the applicant:

Gender	Ethnicity	Racial Classification	
<input type="checkbox"/> Female	<input type="checkbox"/> Hispanic Orgin	<input type="checkbox"/> American Indian	<input type="checkbox"/> Asian or Pacific Islander
<input type="checkbox"/> Male	<input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Bi-racial	<input type="checkbox"/> Black/African American
		<input type="checkbox"/> Other	

<input type="checkbox"/> English Language Learners	<input type="checkbox"/> Learning Disabled
<input type="checkbox"/> Free/Reduced Lunch	<input type="checkbox"/> Physically Disabled
<input type="checkbox"/> Gifted/Talented	<input type="checkbox"/> Special Education
	<input type="checkbox"/> Special Needs
<input type="checkbox"/> Other please specify	
<input type="checkbox"/> Other please specify	

What is the highest level of education completed in your household? Check all that apply.

<input type="checkbox"/> Some High School	<input type="checkbox"/> Undergrad Degree
<input type="checkbox"/> High School	<input type="checkbox"/> Some Grad Program
<input type="checkbox"/> Skilled Trade	<input type="checkbox"/> Masters Degree / MBA
<input type="checkbox"/> Some College	<input type="checkbox"/> PhD/ MD / JD
<input type="checkbox"/> Associates Degree	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Some Undergrad Work	<input type="checkbox"/> Other: _____

If you attend college, will you be the first in your immediate family to do so?

Yes No

Do you have any siblings that currently attend the DAPCEP Program?

Yes No

As the parent/guardian, I certify my (son, daughter, ward) has my permission to participate in this program. It is my understanding and the Program Director's that he/she has my permission to accompany the class on field trips that are a part of the class.

It is the policy of DAPCEP that no person on the basis of race, sex, color, religion, national origin or ancestry, age, marital status or handicap, shall be discriminated against in admissions, activities or educational programs.

In consideration of my child's opportunity to participate in the program, I hereby agree to relinquish and hold DAPCEP, Inc., its agents the Host institutions, and its employees harmless and free from any and all liability which may arise from or be incur.

Parent Consent Form

DAPCEP Student Tracking (Database) and Evaluation System

Project Director: Jason D. Lee
Internal Evaluator: Dr. Enos Massie

Introduction/Purpose: DAPCEP is developing a robust student tracking and evaluation system. This system will consist of a database that will house demographic, academic performance, post secondary major and contact information for DAPCEP participants. The database will assist DAPCEP in identifying trends in student achievement and interests while providing evidence to support the organization's impact on the academic and developmental growth of our participants.

Procedures: The student tracking and evaluation system will acquire pertinent information from participant applications in addition to interviews and/or focus groups with participants and their families during and after their participation in the DAPCEP program. Interviews may be videotaped, photographed and/or audio recorded for records retention and research purposes. Interviews and focus groups will be scheduled for your convenience.

Your Participation is Voluntary: You do not have to participate in student tracking and evaluation activities. You do not have to consent for your child to participate. If you do not want your child to participate, he/she will still be able to participate in all of the DAPCEP activities. No penalty will be assessed to the participant or the participant's family if a decision is made not to participate in the student tracking and evaluation activities.

If you agree to participate, you can refuse to answer any question by simply telling the interviewer that you want to skip the question. You can also stop the interview at any point. This is also true for your child. If you agree to complete the interviews, you are agreeing to give thoughtful, honest answers to the questions.

Confidentiality: Your child's academic information, personal records and answers to the survey questions are confidential. Data will only be used by the DAPCEP office staff and program administrators. DAPCEP will release research data and findings to governing and supporting agencies after all of the information that identifies you and your child (name, street address, phone number, contact information) has been removed. The answers you provide will be summarized and reports of findings will not identify individuals, but will be discussed as an individual with a pseudonym. Again, identifying information will be removed after the study has ended.

Benefits: There is no direct benefit to you from participating in the evaluation study. However, your participation does benefit DAPCEP and the results will help to measure the impact of DAPCEP programming. Outcomes will also assure children receive high quality learning experiences through DAPCEP program affiliation.

Compensation: You will receive no money or compensation for providing data and/or information.

Risks: We tried to make the evaluation questions comfortable to answer. You may skip any questions you do not feel comfortable answering. Your child will be instructed to skip any questions he/she does not wish to answer.

Parent Consent Form DAPCEP Student Tracking (Database) and Evaluation System

Rights as a Research Subject: If you have questions about the study, such as scientific issues, how to do any part of it, or to report an injury, please contact Dr. Enos Massie (248-360-7770) or Jason Lee (313- 831-3050), or Hiram Fitzgerald, Ph.D. of Michigan State University (517-353-8977), fitzger9@msu.edu: regular mail, 22 Kellogg Center, East Lansing, MI 48824. If you have questions or concerns about your role and rights as a research participant, or would like to register a complaint about this study, you may contact, anonymously if you wish, the Michigan State University's Human Research Protection Program at (517- 355-2180), Fax (517-432-4503), or e-mail irb@msu.edu or regular mail at 202 Olds Hall, MSU, East Lansing, MI 48824.

You may consent to all or some of the parts of this consent form.

Your participation in this study is voluntary. You have the right to change your mind at any time. Please call any of the project staff listed above if you want to cancel this consent.

Consent to Participate in the Research Study: I have read, or had read to me, the information in this form. All of my questions have been answered. I have received a copy of this consent form. My initials in each box below indicate which components of the evaluation of DAPCEP I am consenting to. If my initials are absent, it means that I do not give consent to that component of the evaluation.

For each statement that you agree to, PRINT YOUR INITIALS in the box

	Allow my child and family to participate in DAPCEP's student tracking and evaluation project.
	Consider participation in evaluation interviews or focus groups.
	Allow photographs, audio and video images to be taken of my child and I.

Print Participant's Name	Sign Participant's Name	Date
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Print Parent/Guardian's Name	Sign Parent/Guardian's Name	Date
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Note: A completed DAPCEP Application has the following components:

- ✓ **Completed DAPCEP Application signed by both the Students and Parent/Guardian**
- ✓ **Completed & Signed Code of Conduct & Informed Consent Form**
- ✓ **Students currently in grades 4th through 9th must submit a "copy" of his/her last Report Card**
- ✓ **Students currently in grades 10th through 12th must submit a "copy" of his/her Transcript**