



Center for Aquatic Sciences PROGRAM APPLICATION



(PRINT NEATLY AND LEGIBLY)

Name: _____ Grade: _____ School: _____
 Home Address: _____ City: _____ Zip: _____
 Home phone: (_____) _____ Cell: (_____) _____
 Email Address: _____
 Date of birth: _____ Age: _____

Experience:

Volunteer Jobs:

1. Name of Institution: _____ Responsibilities: _____

How long did you work there? _____ Duties: _____

2. Name of Institution: _____ Responsibilities: _____

How long did you work there? _____ Duties: _____

Activities:

1. Name of Club or Group: _____ What did this group do? _____

What did you learn from this experience: _____

2. Name of Club or Group: _____ What did this group do? _____

What did you learn from this experience: _____

To complete your application, please attach the following to this application form:

- 2 page typed essay telling us the following: Note: if you do not have a computer to type, print VERY neatly.
 1. What are your future career goals?
 2. What specific things do you hope to learn by participating in the CAUSE Program?
 3. This program is a very large time commitment (up to 2-3 days per week during the school year and 5 days per week during the summer) what other activities are you involved in? How will you and your **FAMILY** balance your school work, CAUSE Program, and all the activities you are involved in? (please discuss transportation, keeping grades up, if you are responsible for babysitting siblings, etc.)
 4. You will be learning exciting messy science and teaching this to younger children, how do you feel about this? What skills would you like to develop to prepare you to teach others?
- 2 Character Reference Forms



Application deadline:

- Application is due by **January 31, 2021**
- Applications MUST be complete and received by the due date in order to be considered.

How do I hand in my application?

- Complete the Application online: www.aquaticsciences.org
- Mail to: ATTN: CAUSE PROGRAM, 1 Riverside Dr. Camden, NJ 08103
- Email your application, character reference forms (2), and essay to cause@aquaticsciences.org
 - **Note: Please save your work in Word format.**
- Fax your complete application to 856-365-3318



CHARACTER REFERENCE FORM

(2 Completed Reference forms required)

PART A (TO BE COMPLETED BY APPLICANT)

APPLICANT'S NAME: _____

HOME ADDRESS/ZIP: _____

PART B (TO BE COMPLETED BY REFERENCE)

DEAR REFERENCE:

The Applicant is applying for the Community and Urban Science Enrichment (CAUSE) Explorer program. This program provides science and career exploration activities which support the future aspirations of the participant. Explorers will utilize their skills and knowledge to deliver demonstrations and activities to summer camp participants and assist with educational outreach programs. The Education Department welcomes any comments you feel will help us make an appropriate decision regarding this applicant. Please respond only to those items you feel qualified to address based on your knowledge of/or relationship to the applicant.

INTERPERSONAL SKILLS AND COMMUNICATION:

POOR AVERAGE GOOD EXCELLENT

- Overall communication ability
- Ability to work with others
- Communication with adults
- Communication with others
- Ability to work with children
- Teaching potential

Please comment on applicant's abilities regarding interpersonal and communication skills.

ACADEMIC SKILLS: **POOR** **AVERAGE** **GOOD** **EXCELLENT**

Overall academic ability
Attitude about school
Effort applied to studies

Please comment on applicant's overall academic performance.

Please provide examples on how this applicant learns best and in what type of environment can this applicant grasp and retain information.

SOCIAL SKILLS: **POOR** **AVERAGE** **GOOD** **EXCELLENT**

Overall Maturity
Ability to interact with peers
Ability to interact with faculty
Leadership potential

Please comment on applicant's overall social skills.

Please add additional comments you feel would be helpful to the Center for Aquatic Sciences Education Department.

Signature _____

Name _____

Title/relation to applicant _____

Address _____

Telephone _____

Date _____

Please be sure to seal the form in an envelope and place your signature over the seal. Return to applicant or mail to attn: CAUSE Program, Center for Aquatic Sciences, 1 Riverside Drive, Camden, NJ 08103

For Questions Contact: 856-361-1022 or cause@aquaticsciences.org



CHARACTER REFERENCE FORM

(2 Completed Reference forms required)

PART A (TO BE COMPLETED BY APPLICANT)

APPLICANT'S NAME: _____

HOME ADDRESS/ZIP: _____

PART B (TO BE COMPLETED BY REFERENCE)

DEAR REFERENCE:

The Applicant is applying for the Community and Urban Science Enrichment (CAUSE) Explorer program. This program provides science and career exploration activities which support the future aspirations of the participant. Explorers will utilize their skills and knowledge to deliver demonstrations and activities to summer camp participants and assist with educational outreach programs. The Education Department welcomes any comments you feel will help us make an appropriate decision regarding this applicant. Please respond only to those items you feel qualified to address based on your knowledge of/or relationship to the applicant.

INTERPERSONAL SKILLS AND COMMUNICATION:

POOR

AVERAGE

GOOD

EXCELLENT

Overall communication ability
Ability to work with others
Communication with adults
Communication with others
Ability to work with children
Teaching potential

Please comment on applicant's abilities regarding interpersonal and communication skills.

Over Please

ACADEMIC SKILLS: **POOR** **AVERAGE** **GOOD** **EXCELLENT**

Overall academic ability
Attitude about school
Effort applied to studies

Please comment on applicant's overall academic performance.

Please provide examples on how this applicant learns best and in what type of environment can this applicant grasp and retain information.

SOCIAL SKILLS: **POOR** **AVERAGE** **GOOD** **EXCELLENT**

Overall Maturity
Ability to interact with peers
Ability to interact with faculty
Leadership potential

Please comment on applicant's overall social skills.

Please add additional comments you feel would be helpful to the Center for Aquatic Sciences Education Department.

Signature _____

Name _____

Title/relation to applicant _____

Address _____

Telephone _____

Date _____

Please be sure to seal the form in an envelope and place your signature over the seal. Return to applicant or mail to attn: CAUSE Program, Center for Aquatic Sciences, 1 Riverside Drive, Camden, NJ 08103

For Questions Contact: 856-361-1022 or cause@aquaticsciences.org