

2008 Virginia Science Standards Institute Application

Applicant Name: _____

School Name: _____

School Division: _____

Work Address: _____

Home Address: _____

Applicant E-mail: (Required)* _____

Phone: (Home) _____

Phone: (Work) _____

Phone: (Other) _____

Phone: (Fax) _____

Please check which science grade level(s) you currently teach:

Fourth grade

Fifth grade

Please check the ONE statement below that applies to you:

I can attend either institute.

I can ONLY attend the VSSI at Twin Lakes State Park (July 20-25).

I can ONLY attend the VSSI at Hull Springs Farm (August 3-8).

School Principal's E-Mail: (Required)* _____

** Communication will occur primarily via e-mail. The applicant and principal must provide e-mail addresses that will be checked on a regular basis during the school year as well as during the summer months.*

I certify this application with my name and signature below.

Printed Name of Principal

Signature of Principal

Date

Please fax this application by June 9, 2008, to:

Barbara Young, Elementary Science Specialist

Virginia Department of Education

Fax: (804) 786-1703

Notification of acceptance will be provided to the participant and the principal via e-mail by June 13, 2008.