Newsletter #1

SSA Acceptance Form
for MathStar, BioStar, ChemStar, SOAR

Summer Science Academy
Xavier University of Louisiana • 1 Drexel Drive • Box 105 • New Orleans, LA  70125
(504) 520-5418 • Fax (504) 520-7998

Items 1-5 should be completed by the student accepted into the program.

1. What is your name? (Please print)  __________________________________________

2. Into which program were you accepted?
   □ Math Star: for students who will be taking their first algebra course next fall.
   □ BioStar: for students who will be taking their first biology course next fall.
   □ ChemStar: for students who will be taking their first chemistry course next fall.
   □ SOAR 1: for students, who have finished Chemistry, will be seniors next fall,
       and are interested in Biology, Chemistry, Medicine, Dentistry,
       Pharmacy or similar areas.

3. Sign below to indicate you meet the qualifications of the program into which you are accepted.
   Signature of participant:  __________________________________________

4. All programs conducted by Summer Science Academy are intense honors programs designed to help
   students with demonstrated academic potential reach the “Superstar” status needed to achieve a career
   in the biomedical sciences. Because the program is intense and short in length, it DOES make a
   difference if you miss a day of class. Therefore, there will be NO excused absences from the program
   (i.e. you will receive a “0” grade for ALL absences regardless of the reason those absences occurred)
   and students who are repeatedly absent or tardy will be dismissed from the program.
   Sign below to indicate that you understand this policy.
   Signature of participant:  __________________________________________

5. In addition, there will be at least two hours of homework each night. Sign below to indicate that you agree
to do this homework.
   Signature of participant:  __________________________________________

6. T-shirt size: (Adult sizes)    ____Small  ____Medium  ____Large  ____XL  ____2XL  ____Other

(over)
7. Xavier expects students in its precollege summer programs to behave in a mature, responsible manner without extensive supervision. Students who are disruptive will be dismissed from the program and will not be eligible to participate in future programs conducted by XU’s Summer Science Academy. Any student who loses dormitory privileges will automatically be expelled from SOAR1.

- During the day ________________________________ ______________________
  Name of person to contact     Phone Number

- After 5pm ________________________________ ______________________
  Name of person to contact     Phone Number

Signature of parent or guardian required: ____________________________

WHAT IS THE DATE OF YOUR ACCEPTANCE LETTER?

_____________________

Revised 1/2014
Students participating in the summer science programs sponsored by Xavier University are expected to display good manners and follow these general rules of conduct while on Xavier’s campus.

Things Which Students Should Do:

- Be courteous and respectful at ALL times.
- Keep the noise down while changing classes so as not to disturb persons in other classrooms.
- Clean and straighten up after leaving a classroom or laboratory. Specifically, be sure all movable chairs are back under the desks, all trash is thrown in waste paper baskets, the chalkboard is erased, and everything in a classroom or laboratory is straightened up before leaving.
- Wear your ID card with your name visible at all times while on campus. Faculty may ask you to show it at any time.
- Come to class on time. Tardiness will result in loss of 50% of the grade, which could have been earned in a class.
- Attend all activities planned for you. Note: There are NO excused absences in the program. You DO need to attend class every day. You will get a “0” for any absence, even if unavoidable.

Things Which Students Should NOT do while attending classes:

- Do not use iPods, MP3 Players, CD’s, cell phones, etc.
- Do not eat or drink in classrooms or laboratories. (In the Science Building, eating is permitted in the Student Lounge on the first floor and in small lounges near the main stairwell on the second, third, and fourth floor.)
- Do not smoke on Xavier’s campus.
- Do not sit on tables, laboratory benches, the backs of chairs, writing desks, etc. Sit only on chairs or stools.
- Do not play with models, equipment, or chemicals when in laboratories.
- Do not wear caps or hats in buildings.
- Do not curse or use profane language on campus.
- Do not wear clothing, which displays vulgar or profane writing on it on campus. Do not wear tank tops on campus.
- Do not write on walls. Do not write profane or vulgar things on chalkboards.
- Do not ride the elevators in the Science Building. If there are physical reasons why you need to ride the elevators, please see your program director for permission to do so.
- Do not go into any building unless instructed to do so. In addition, do not go onto 2nd floor of the Science Building. That floor is overcrowded because of summer programs offered by departments located there.

(over)
Rules regarding visitors:

- Students in summer programs may NOT have visitors on campus except in an emergency.
- In case of an emergency, the person wishing to contact a participant (his/her parent, guardian, or similar responsible adult) should come to the Premedical Office (NCF Science 108F) and someone will get their son/daughter/ward from his/her classroom.

Penalty for disobeying the above rules: Failure to abide by the above rules of conduct will result in immediate expulsion from MathStar, BioStar, ChemStar, or SOAR1.

Rules regarding illegal drugs and underage drinking: Xavier has ZERO tolerance for use of illegal drugs and underage drinking.

- **Alcoholic beverages:** Xavier fully supports Louisiana laws regarding the consumption of alcoholic beverages. Those laws state that it is illegal to drink such beverages if you are younger than 21. Participants caught violating those laws on campus will be turned over to NOPD.
- **Illegal drugs:** Xavier has a policy of zero tolerance toward drugs. If you are caught using or distributing illegal substances on campus, the University will call NOPD immediately.

Please sign to confirm that you have read and understand the rules and agree to adhere to all of them. If the student does not adhere to the rules they will be terminated from the program and will not be eligible to attend any of the Summer Science Academy Programs offered through Xavier University of Louisiana.

Signature of Student: ________________________________  __________________

Signature of Parent: ________________________________  __________________

Revised 1/2014
**Female Residence:** St. Katharine Drexel (504) 520-7350  
**Male Residence:** St. Michael (504) 520-7347

- **ARRIVE** before 6:00pm (central time) on Sunday, July 6<sup>TH</sup>. All students must **LEAVE** the dormitory by Saturday, July 26<sup>th</sup>. The program will end on Friday, July 25<sup>th</sup>.

- Contact student health services if there are any questions regarding the required immunizations: (504) 520-7392 or (504) 520-7352. *You will not be allowed to check into the dormitory without the required immunizations.*

- Students living on campus will not be allowed to have personal cars.

- If a student is dismissed from the dormitory, he/she will automatically be dismissed from SOAR1.

- Please keep our numbers handy as you travel: program office (504) 520-5418; campus police (504) 520-7490; the residence halls listed above.

- Information sessions for parents and students will be held on Sunday, July 6<sup>TH</sup> at 9am, 11am, 1pm, 3pm, and 6pm.

- The general assembly for “students only” will be held at 7:30 p.m. on July 6<sup>TH</sup>.
Dormitory Living-(Bring with you!)

We recommend that you bring the following items for a smoother transition to the collegiate life style.

- ID card/driver’s license
- Prescribed medication
- Alarm clock
- Rain Gear and Umbrella
- Family photos
- Casual clothes for attending class
- Light Sweaters/Jackets (for cool temperatures in a few classrooms)
- Dress Clothes (church services/group outings)
- Clothes hangers
- Power surge protector with minimum joule rating of 600
- Bed linen & pillows (twin)
- Blankets
- Mattress cover (twin)
- Towels and wash cloths
- Trash can
- Plastic storage containers
- Shower cap & shoes
- Laundry supplies
- Laundry basket
- Iron
- 21" refrigerator (optional)
- small stereo/ small television (optional)
Dormitory Living-(Leave at Home!)

<table>
<thead>
<tr>
<th>Microwaves</th>
<th>Candles</th>
<th>Hot Plates</th>
<th>Ceiling Fans</th>
<th>Alcohol/Drug Paraphernalia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Weapons</td>
<td>Incense</td>
<td>Pets</td>
<td>Barbeque Grills</td>
<td>Window Air Conditioners</td>
</tr>
<tr>
<td>Firearms</td>
<td>Potpourri</td>
<td>Space Heaters</td>
<td>Electric Blankets</td>
<td>Immersion Heaters</td>
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<tr>
<td>Explosives</td>
<td>Burners</td>
<td>Halogen Lamps</td>
<td>Dimmer Switches</td>
<td>Appliances with Exposed Heating Coils</td>
</tr>
</tbody>
</table>

**WHAT WE HAVE FOR YOU**

A desk, closet, and storage shelves are provided in each resident's room. Most suitcases and plastic storage containers can be stored underneath beds.

We also have the following for you:

- Twin Bed & Mattress
- Wireless Internet
- Vending Machines
- Free Washers/Dryers
- Computer Labs
- Study Area
- Big Screen TV
- Lounges
- Educational Programs
- Bulletin Boards
- Microwaves
- Security Doors
- Shopping Trips
- Social Programs
- Hall Council
- Message Service
- 24 Hr./7 Day A Week Campus Police Patrol
- 24 Hr. Desk Staff

Revised 1/2014
Authorization for Emergency Medical Care

I authorize and request that Xavier University of Louisiana or the Summer Science Academy Program handle any emergency for my child resulting from accident or illness. I will pay for all medical expenses ensued from said emergency care. I understand that my child will be taken to the nearest hospital emergency room in the event that emergency treatment is required and that Summer Science Academy will notify me immediately. I also understand that in the event of an accident, Xavier University’s Summer Science Academy is not responsible beyond the limits of the insurance provided by the program’s accident insurance policy.

<table>
<thead>
<tr>
<th>Student’s Name:</th>
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<tbody>
<tr>
<td>Mother/Female Guardian’s Printed Name:</td>
<td></td>
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<tr>
<td>Father/ Male Guardian’s Printed Name:</td>
<td></td>
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<tr>
<td>Home Phone:</td>
<td></td>
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<tr>
<td>Parent’s Alternate Phone:</td>
<td></td>
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<tr>
<td>Alternate Contact’s Name:</td>
<td></td>
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<tr>
<td>Alternate Contact’s Phone:</td>
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<tr>
<td>List any allergies, health problems, physical disabilities or special medical needs of which the Summer Science Academy Staff should be aware:</td>
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Parent/Guardian Certification:

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<tr>
<th>Parent/Guardian</th>
<th>Date of Signature</th>
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</table>
To Whom It May Concern:

Permission is granted for my child/guardian to participate in all field trips, cultural and/or social events, and other activities sponsored by Xavier University’s Summer Science Academy. I acknowledge that neither Xavier University of Louisiana nor the Summer Science Academy will be held liable for any damages incurred by my child’s participation in any event or activity.

I am also authorizing that the Summer Science Academy handle any emergency care for my child/guardian resulting from any accident or illness. I understand that my child/guardian will be taken to the nearest hospital (emergency room) in the event that emergency treatment is required; and that the Summer Science Academy will notify me immediately. I will pay for all medical expenses resulting from any emergency care.

______________________________________________________
Student’s Printed Name:

______________________________________________________
Signature: ____________________________ Date: __________

______________________________________________________
Parent/Guardian’s Printed Name:

______________________________________________________
Signature: ____________________________ Date: __________

______________________________________________________
Home Phone: ____________________________

______________________________________________________
Cell Phone (parent/guardian): ____________________________
Authorization and Release for Use of Name, Photograph, or Likeness

We/I, parent(s) of _____________________________________________________________ and ___________________________________________________________ hereby authorize Xavier University of Louisiana, a Louisiana non-profit-corporation, to use the name, photograph and/or likeness of ___________________________________________________________, in any advertisements and/or any publicity in newspapers, school bulletins, brochures and/or other literature about Xavier University and/or its programs and/or on the Xavier University of Louisiana website and/or in any televised or video media, including but not limited to any video posted on the Xavier University of Louisiana, which usage is to be determined in the sole discretion of Xavier University of Louisiana. We grant the foregoing authorization in consideration of our desire to promote Xavier University of Louisiana and specifically waive any other consideration and/or royalty and/or compensation.

Further, in consideration of the foregoing, we/I agree to defend, indemnify and hold harmless Xavier University of Louisiana, its members, directors, officers, administrators, professors, employees, agents, assigns, insurers and/or reinsurers from any liability or damages of any kind or type (including but not limited to mental, physical, emotional or economic damages) which may arise from the authorized use set forth above, including but not limited to any claims or causes of action arising in negligence or intentional fault, including but not limited to any claims or causes of action of defamation or invasion of privacy.

Participant’s Name: ____________________________________________________________

Program: _____________________________________________________________________

Hometown: ____________________________________________________________________

Phone Number (_____)_______________________Alternate (_____)______________________

Email Address: __________________________________________________________________

Participant’s Signature ___________________________ Date ________________________

Parents’ Signatures ___________________________ Date ________________________