

Dear Michigan Math and Science Scholar and Family:

Enclosed please find the various forms and information concerning your participation in the Michigan Math and Science Scholars (MMSS) program.

- Welcome Reception Information – Page 2
- Parental Consent Forms – Page 3-4
- Release of Liability Form – Page 5-6
- Authorization for Medical Treatment Form –Page 7
- Health Insurance Information Sheet –Page 8
- Emergency Information Form – Page 9
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**THE FOLLOWING INFORMATION MUST BE UPLOADED
VIA THE STUDENT PORTAL AS SOON AS POSSIBLE**

Please complete, scan and upload the following information to the Student Portal to complete admission:

- ☐ Parental Consent Forms (Pages 3-4)
- ☐ Release of Liability Form (Pages 5-6)
- ☐ Authorization for Medical Treatment Form (Page 7)
- ☐ Health Insurance Information Sheet (Page 8)
- ☐ Emergency Information Form (Page 9)
- ☐ Medical Information Form (Page 10)
- ☐ MMSS Participant Responsibility Contract (Pages 11-12)
- ☐ Student Shuttle Information (Page 22) – *Travel Information must be submitted via the “Travel Button” in the Student Portal no later than 3 weeks prior to the start of the session.*

ALL INFORMATION IS TO BE UPLOADED TO THE STUDENT PORTAL

If *necessary*, please direct correspondence to:

Michigan Math and Science Scholars
2074 East Hall
530 Church Street
Ann Arbor, MI 48109-1043

Or send a completed, scanned, PDF copy to: mmss@umich.edu

Student Welcome Reception Information

Session I: Sunday, June 28, 2020 from 4:00 pm to 5:00 pm
Session II: Sunday, July 12, 2020 from 4:00 pm to 5:00 pm
Session III: Sunday, July 26, 2020 from 4:00 pm to 5:00 pm

Check in with us at the East Hall front table anytime from 3:00 pm – 3:50 pm

Mathematics Atrium
East Hall, 530 Church St., Ann Arbor, MI 48109

The Michigan Math and Science Scholars program invites all participants (residential and commuter) and accompanying family members (optional) to attend a Welcoming Reception in the Math Department's East Hall Atrium. Course professors, graduate student instructors, and undergraduate student instructors wish to welcome you, meet your family, and answer your questions. Participants will be grouped in their classes to meet their class instructors and fellow classmates. Light refreshments will be served.

Residential students should plan to arrive on campus between 1:30 pm and 3:00 pm, and go directly to West Quad Residence Hall for check-in. The residence hall is a short (10 minute) walk to East Hall. After checking in, residential students should proceed to the Mathematics Atrium in East Hall to check-in at the front table anytime from 3:00 pm through 3:50 pm.

Commuter students should plan to arrive at the Mathematics Atrium in East Hall anytime between 3:00 pm and 3:50 pm to check-in with MMSS staff. Please allow enough time to be checked-in at the Welcome Reception promptly by 4:00 pm.

Parking: On Sundays only, parking is free in the Church Street Parking Garage (street address- 500 Church St.), directly across the street from the entrance of East Hall. Please see the attached University of Michigan map (page 17) for more parking information.

East Hall is located near the corner of South University and Church Street. Please enter through the Mathematics entrance labeled above the doors facing Church Street.

NOTE: There will be a **residential student** orientation from 5:00 pm - 6:00 pm in room 1360 East Hall following the Welcoming Reception. This is a mandatory orientation for all **residential** students. Pizza and soft-drinks will be served to students; parents will be dismissed at 5:00 pm.

Commuter students who are unable to attend the Sunday activities should contact MMSS administration (mmss@umich.edu). Please arrive at 2074 East Hall by 8:30 am on Monday, the first day of your session, to pick up course materials from the Mathematics department administrative offices before the mandatory computer orientation begins at 9:00 am.

Legal Guardian Consent Form – Return to the MMSS Office ASAP

This is a legally binding contract. Please read the following information carefully before signing.

As the parent or guardian of _____, I certify that my child has my permission to participate in the Michigan Math and Science Scholars (MMSS) program between the dates of _____ and _____, 2020.

He/she has my permission to accompany supervised groups of program participants on class trips and extracurricular activities, and to make short, counselor-approved trips on and off campus, between the hours of 8:00 am and 11:00 pm, accompanied by fellow MMSS students, counselors, and/or staff only.

I also understand that he/she will have free time each weekday between 12:00 - 1:30 pm when he/she may have access to the University of Michigan-Central Campus area.

He/she has my permission to ride as a passenger in University vehicles, on City of Ann Arbor public transportation (including emergency response vehicles such as an ambulance), on officially chartered busses, and on foot, as counselors and MMSS staff deem appropriate.

I understand that he/she is **required** to attend class from 9:00 am to 12:00 pm, and from 1:30 pm until 4:30 pm, each day from Monday through Friday (except the last Friday where dismissal is at 12:00)

It is my understanding that s/he will be subject to the rules and regulations of the University of Michigan and MMSS program regardless of his/her age. I understand that any student found in possession of, or under the influence of, alcohol or non-prescribed/illegal drugs will immediately be expelled from the program. I also understand that if my child repeatedly disobeys University or MMSS policies and regulations, he or she may be expelled from the program at the MMSS Program Coordinator's discretion. I understand that if my child is sent home for any reason, all costs, fees, and charges associated with such action will be billed to my student/child and me as his/her guardian and that no refund will be issued.

I understand that, if a medical *emergency* arises, I will be notified as soon as reasonably possible, but that if I cannot be reached immediately, any and all medical treatments deemed necessary by competent medical personnel at the University of Michigan Hospitals or other appropriate health care facilities are authorized by my signature on this form.

I understand that during this program my child will have unrestricted access to the Internet. I understand the implications of this access, including the University policy explicitly prohibiting use of computer systems and networks to violate copyright laws in illegally downloading copyright protected information; violations could result in serious fines and penalties.

I also understand that my child will be around a diverse population of MMSS students and in the vicinity of University of Michigan undergraduate and graduate students, all coming from different cultures and backgrounds from my own. I understand that MMSS students range in age from early to mid to late teenage years.

Continued on next page....

Legal Guardian Consent Form – Continued – Return to MMSS Office ASAP

This is a legally binding contract. Please read the following information carefully before signing.

I understand that the information listed in the medical information section will be kept confidential and only shared on a need-to-know basis between the Michigan Math and Science Scholars program staff and agents, and if needed the appropriate medical treatment center(s).

I understand that basic preventative medical care (such as basic first aid) may be administered to my participant by MMSS staff, without the need for us to contact the participant's guardians (i.e. the administration of ibuprofen, acetaminophen, or other over-the-counter medicines for minor aches and pains) but will be accompanied by a signed report documenting the incident.

Furthermore, I understand that while neither the Housing Office nor MMSS require any specific immunizations to live in the residence hall, it is strongly encouraged that all University of Michigan summer program participants have up-to-date immunizations, and that I have been instructed to contact the University of Michigan Housing Office and University of Michigan Health Service if I have any related questions.

I understand that my child, if participating in a lab-based class, may be participating in lab activities. While all proper safety procedures are taken by trained and licensed faculty, lab activities may present an increased risk due to their nature. Specifically, students participating in the Forensics Physics course may have the opportunity to work with XM radiation sources (low emission radiation material that is legally purchased without the need for a license) and will be done so under the direction and supervision of trained and licensed faculty members. All labs adhere to strict OSEH, University, State, and Federal guidelines. More information can be found through the Occupational Safety and Environmental Health department for the University of Michigan at <http://www.oseh.umich.edu/>

I allow and am aware that my child may be photographed, videotaped, audio taped, and/or recorded using any other form of media recording ability. I furthermore allow for these recordings to be used in University of Michigan and MMSS publications that reflect upon my child in a positive manner. I allow for my child to participate in outreach interviews with University press officials. I allow for the Mathematics Department, Science Department, the College of Literature, Science and the Arts, and Office of the Provost of the University of Michigan to use attributed quotes from my child's work and/or program evaluation for program promotion, publicity and fundraising purposes.

Student Name (Print): _____

Student Signature: _____ Date: _____ (mm/dd/yyyy)

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____ Date: _____ (mm/dd/yyyy)

Daytime Phone Number(s): (____) _____ - _____ (____) _____ - _____

Evening Phone Number(s): (____) _____ - _____ (____) _____ - _____

Release of Liability Agreement – Return to the MMSS Office ASAP

This is a legally binding contract. Please read the following information carefully before signing.

As the parent or guardian, I certify that (print full name) _____
has my permission to participate in the Michigan Math and Science Scholars (MMSS) program for
the period of _____, 2020 to _____, 2020.

I/We do hereby delegate to the Michigan Math and Science Scholars program, its employees, clinicians, trainers, nurses or agents the authority to seek, obtain, and approve any medical care and treatment including, but not limited to, x-ray examination, anesthetic, medical, dental or surgical diagnosis, or treatment and medical care which is deemed advisable by, and is to be rendered under the general supervision of any physician or surgeon, for the above-named minor which, in their judgment, is necessary for the health and well-being of said minor during his/her participation in the Michigan Math and Science Scholars program. This includes the use of basic first aid, which can be administered by appropriately trained MMSS staff.

I/We assign payment to those medical vendors for all services that these same medical vendors may render. It is understood that this authorization is given in advance of any specific diagnosis, or treatment or medical care being required and is to serve as specific consent to any and all such diagnoses, treatment or hospital care which may be deemed advisable. I/We understand that I/we are responsible for any costs incurred that are not covered by insurance and we agree to hold the University of Michigan and Michigan Math and Science Scholars program, its employees or agents harmless for any liability arising out of any good faith actions taken in and obtaining medical treatment for the above-named minor.

In consideration of the participant in the Michigan Math and Science Scholars program, the undersigned parent/guardian hereby releases and holds harmless the Regents of the University of Michigan and its employees (hereinafter collectively referred to as “University”) and the Michigan Math and Science Scholars program and its employees from any and all liability occurring during the participation of the undersigned child/participant (print full name)

_____.

In particular, the undersigned parent/guardian acknowledges that he/she and such child will not hold the University of Michigan, the College of LS&A, its Regents, or the Michigan Math and Science Scholars program, its staff and counselors, liable for any expenses, property damages, personal injuries and/or death sustained by such child while participating in the program/camp. Furthermore, the undersigned parent/guardian acknowledges that he/she has been and currently is, prior to the commencement of the Michigan Math and Science Scholars program, aware of and understands the risks involved in such activity, and is prepared to assume, on behalf of such child and himself/herself, all of such risks as his/her and the child’s sole responsibility.

Continued on next page....

Release of Liability Agreement -- Continued
Return to the MMSS Office ASAP

This is a legally binding contract. Please read the following information carefully before signing.

It is my understanding that my child (print full name) _____ will be subject to the rules and regulations of the University of Michigan and the Michigan Math and Science Scholars program regardless of his/her age at the time of attendance. I understand that any student found in possession of fireworks, explosives, any and all weapons, internal or external possession of alcohol, and/or non-prescribed/illegal drugs will be immediately expelled from the program/camp.

I also understand that if my child repeatedly disobeys University or the Michigan Math and Science Scholars program policies and regulations, he/she may be expelled from the program. I understand that all students expelled from the program will be released to the custody of an agreed upon individual or sent directly home via public plane, train, or bus transportation at the cost of the child/participant and his/her guardian(s).

The terms and conditions of this Agreement shall be legally binding upon the undersigned parent/guardian and such child and his/her respective estate, representative and assigns.

Student Name (Print): _____

Student Signature: _____ Date: _____ (mm/dd/yyyy)

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____ Date: _____ (mm/dd/yyyy)

AUTHORIZATION FOR MEDICAL TREATMENT
Return to the MMSS Office ASAP

PARENTAL CONSENT FORM

This is a legally binding contract. Please read the following information carefully before signing.

I/We, parent(s) or legal guardian(s) of (print full name) _____
an un-emancipated minor, grant my/our permission to participate in the Michigan Math and
Science Scholars program.

I/We do hereby delegate to the University of Michigan and the Michigan Math and Science
Scholars (MMSS) program, its employees, clinicians, trainers, nurses or agents the authority to
seek, obtain, and approve any medical care and treatment including, but not limited to, x-ray
examination, anesthetic, medical, dental or surgical diagnosis, or treatment and medical care which
is deemed advisable by, and is to be rendered under the general supervision of any physician or
surgeon, for the above-named minor which, in their judgment, is necessary for the health and well-
being of said minor during his/her participation in the Michigan Math and Science Scholars
program.

I/We approve the administration of basic preventative first aid, such as the use of ibuprofen
(*Motrin, Advil*) by appropriately trained MMSS staff, and that in such cases immediate contact
between the program and us as the child's guardian(s) is not necessary, but that a detailed and
signed write-up documenting the incident will take place and a copy may be requested at a later
time.

I/We assign payment to those medical vendors for all services that these same medical vendors
may render. It is understood that this authorization is given in advance of any specific diagnosis,
treatment or medical care being required and is to serve as specific consent to any and all such
diagnoses, treatment or hospital care which may be deemed advisable. I/We understand that I/we
are responsible for any costs incurred that are not covered by insurance.

Further, I/We agree to hold the University of Michigan, its Regents, and the Michigan Math and
Science Scholars program, its employees or agents harmless for any liability arising out of any
good faith actions taken in seeking and obtaining medical treatment for above-named minor.

Student Name (Print): _____

Student Signature: _____ Date: _____ (mm/dd/yyyy)

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____ Date: _____ (mm/dd/yyyy)

HEALTH INSURANCE INFORMATION SHEET – Return to the MMSS Office ASAP

EVERY STUDENT MUST HAVE THIS FORM ON FILE IN ORDER TO PARTICIPATE

U.S. recognized health insurance information must be provided, if applicable. If a participant does not have appropriate health insurance, please be advised that, should a participant require medical attention, **you as the child/student's guardian are responsible for paying any uncovered expenses.**

Participant Full Name _____

Participant's Address _____
Street City State Zip Country

Participant's Phone Number () - Date of Birth _____
(mm/dd/yyyy)

☐ Please check this box if the participant does **NOT** have U.S. recognized health insurance, and skip the signature section below.

Insurance Company Name _____ Effective Date _____

Address of Insurance Company _____

Phone Number of Insurance Company _____ Group # _____

Policyholder's Name _____ Policy # _____

Policyholder's Address _____
Street City State Zip Country

Relationship to Participant _____ Is preauthorization required? Yes / No

Contract # _____ Employee Number _____

Name and Phone Number of Primary Care Physician:

This is a legally binding contract. Please read the following information carefully before signing.

I, _____ hereby authorize the release of any medical information in regards to my child/participant, _____ which might be needed in connection with payment for medical services. I request that payment under my medical insurance program be made directly to the provider on any bills for services rendered by that provider. I understand that I am financially responsible for fees not covered by this authorization.

Student Name (Print): _____

Student Signature: _____ Date: _____ (mm/dd/yyyy)

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____ Date: _____ (mm/dd/yyyy)

EMERGENCY INFORMATION FORM – Return to the MMSS Office ASAP

Please complete this form in its entirety. This information will be helpful in the unlikely event of an accident or sudden illness.

Participant Name _____ Phone _____

Participant Address _____
Street City State Zip Country

Date of Birth _____ (mm/dd/yyyy)

Name of Personal Physician _____ Phone _____

Physician Address _____
Street City State Zip Country

MOST CURRENT EMERGENCY CONTACT INFORMATION DURING PROGRAM TIME FRAME

Required:

Person(s) to be contacted in case of emergency:

Name _____ Relationship _____

Address _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Name _____ Relationship _____

Address _____

Day Phone _____ Evening Phone _____ Cell Phone _____

Name _____ Relationship _____

Address _____

Day Phone _____ Evening Phone _____ Cell Phone _____

CONFIDENTIAL MEDICAL INFORMATION – Return to the MMSS Office ASAP

Participant Name: _____

Indicate medication(s) which is/are taken on a regular or prescribed basis. Participants who have an allergy that requires the use of an Epi-pen should bring their prescribed pen with them and keep it on their person while participating in the MMSS program. If you require additional space, please attach a separate sheet describing medications in the same format as below.

Note: Participant should bring an adequate supply of their medication(s) with them even if they normally do not need them.

_____ Name of Medication	_____ Dosage	_____ Prescribing Physician
_____ Name of Medication	_____ Dosage	_____ Prescribing Physician

Is there a personal medical history involving any of the following:

	Yes	No		Yes	No
Allergies	_____	_____	Heart Disease	_____	_____
Convulsions	_____	_____	Phobias or Fears	_____	_____
Diabetes	_____	_____	Past Injuries/Illnesses	_____	_____
Disabilities	_____	_____	Past Operations	_____	_____
Depression	_____	_____	Anxiety	_____	_____
ADD/ADHD	_____	_____	Bipolar	_____	_____
Autism Spectrum Disorders	_____	_____	Asthma	_____	_____
Other mental condition	_____	_____	Other	_____	_____
Epilepsy/Seizure Disorder	_____	_____			

If you answered “yes” for any of the above conditions, please explain in detail. Use a separate page if necessary. Please explain in detail any allergies you have, their sensitivity, usual reaction, and recommended treatment. If you have a disability that requires our attention, please let us know as soon as possible. List any recent surgeries, major procedures, or illnesses that you might have.

Please advise of any dietary restrictions, special instructions, side effects, or emergency procedures:

Does the student have an action plan for noted food allergies? _____ Yes _____ No
(If yes, please attach it to this document).

Date of Last Tetanus Booster _____ Last Tuberculosis test (if any)? _____

Participant’s Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Student Participant Responsibility Contract – Return to the MMSS Office ASAP

This is a legally binding contract. Please read the following information carefully before signing.

Participant Name: _____

The Michigan Math and Science Scholars (MMSS) program personnel want program participants to have a great time during their campus experience! All of us welcome you with friendliness, flexibility, and fun as high priorities for our time together. In addition, your safety is our **top** priority. For that reason, we are taking this opportunity to clarify our program regulations. Student participants must sign and turn in a copy of this contract in order to participate in the Michigan Math and Science Scholars program.

STUDENTS - Please initial each clause of this contract

1. I understand that the use of alcohol and non-prescribed/illegal drugs is expressly forbidden by the University of Michigan Math and Science Scholars Program, and that any student found to be in possession of, or under the influence of, alcohol or such drugs will be expelled from the program immediately with no refund given and sent home at his/her own expense. I also understand that the University of Michigan is a Tobacco-Free campus.
Initials _____

2. I understand that between the hours of 8:00 am and 9:00 pm, during free time, I can seek counselor approval to make short trips on/off campus, accompanied by at least two other students. I understand that counselors will accommodate all reasonable requests but that I am bound to be completely honest with these requests. I understand that on such trips returning on time is of paramount importance. I understand that if I violate the letter or spirit of this regulation, I may be expelled from the program with no refund.
Initials _____

3. I understand that during program activities, and during unstructured time in the dorms, the counselors will be striving at all times to balance the individual desires of program participants with the rights of others, obligations to the MMSS community, and the safety of all. I promise to do my part and to follow counselor regulations towards achieving these goals.
Initials _____

4. I understand that during this program I will have unrestricted access to the Internet. I understand the implications of this access including the University policy explicitly prohibiting the use of its computer systems and networks to violate copyright laws to illegally download copyright protected information; violations could result in serious fines and penalties.
Initials _____

Continued on the next page...

Student Participant Responsibility Contract (Cont.) – Return to the MMSS Office

5. I understand that I will be held accountable for any damage that occurs to the residence hall room assigned to me. I will have the opportunity to inspect the room with my roommate as we move in, noting its condition on a check-in sheet. This will be used as a comparison upon vacating this room. My family may be billed for damages that occur to this room during my occupation of it, whether or not they were caused directly by me or my actions.

Initials _____

Please advise us here of any special concerns you have for your participation in MMSS program:

Student Name (Print): _____

Student Signature: _____ Date: _____ (mm/dd/yyyy)

Parent/Guardian Name (Print): _____

Parent/Guardian Signature: _____ Date: _____ (mm/dd/yyyy)

Tuition and Fees Worksheet (To submit if paying via check only)

Last Name: _____ **First Name:** _____

You may select and pay for your tuition and optional services via a variety of methods. If you would like to pay via credit card, please log into your UM Friend Account and return to your MMSS online application. Under the “payment” tab, you will be able to select any optional services (such as housing, Cedar Point, shuttle service, or the Detroit Science Center) and pay for them at that time. If you need to deselect any previously chosen optional services at the time of application submission, please contact our office and we would be happy to assist you.

IF PAYING VIA CHECK, MONEY ORDER OR WIRE TRANSFER:
Please complete the worksheet below and submit with correct payment to our office.

The schedule below describes all mandatory fees (tuition) as well as those considered optional. Please complete the following to calculate your charges. ***Note: The \$100 non-refundable application processing fee is not included in your total due and should not be subtracted when calculating your total due.***

MMSS INVOICE	<i>(To include with payment if submitting via mail)</i>		
Item	Cost (Per Session)	Number (of Sessions)	TOTAL
Tuition	\$1,300		
Room & Board	\$850		
Linen Packet	\$25		
Airport shuttle			
Round-Trip	\$50		
One-Way	\$25		
Saturday Trip	\$65		
Sunday Trip	\$40		
Extra Night	\$50		
Wire Transfer Fee	\$10		
		TOTAL AMOUNT	

Continued on the next page...

Tuition and Fees Information

Please note that the balance for tuition, housing and all other fees is due to the MMSS office no later than the date specified in your offer letter. Accepted methods of payment are:

- Checks drawn on US banks that are located within the United States.
- Credit Card (ONLINE ONLY. Log into UM Friend Account and access your online application.)
- Money orders drawn on US banks located within the United States.

OR

- Wire transfer (PLEASE BE SURE TO INCLUDE THE NAME OF THE STUDENT)

Bank Name: Bank of America

ABA/Routing Number: 026-009-593 (wire transfer)
071-000-039 (ACH only)

SWIFT Bank Identifier Code: BOFAUS3N

Account number: 54011-25777

Account name: The Regents of the University of Michigan EFT Depository

Attention: The Michigan Math and Science Scholars/STUDENT NAME

Payments can be mailed directly to:

The University of Michigan
Department of Mathematics
Michigan Math and Science Scholars
2074 East Hall
530 Church Street
Ann Arbor, MI 48109-1043

MMSS Refund Policy

In the event that you have to withdraw from the MMSS program, the following refund policy will apply and a refund (if any) will be issued in the same format as the original payment was received.

<u>Date</u>	<u>Action</u>
Before and up to May 1	50% refund of tuition and fees
May 1 up to June 1	25% refund of tuition and fees
June 1 and after	No Refund

Due to the fixed operating costs associated with the MMSS program, no refund or pro-rated tuition will be given to participants who leave the program early due to medical injury/illness, disciplinary action, family emergency, self-elected withdraw, or any other reason.

What to Bring to the MMSS Program

Students should prepare to pack comfortable clothing suitable for participating in lectures, laboratory and field work, and outdoor activities. Ann Arbor, Michigan experiences warm to hot summers with occasional cool days, so please plan accordingly.

Bed Sheets/Blankets –twin extra long *	Pillows*
T-shirts	Sweater/Sweatshirt (dorms are air-conditioned and at night)
Shorts	Jeans/Pants
Alarm Clock/Clock Radio	Pajamas and Robe
Underwear and Socks	Athletic Shoes/Closed-toed shoes (required for lab classes)
Sandals	Shower Shoes/flip-flops
Umbrella	Light Jacket (waterproof is nice)
Hat/brimmed cap	Sunglasses
Swimsuit	Pool/bath towels
Toiletry kit	Quarters for laundry

- If you are signed up for ***Life, Death and Change: Landscapes and Human Impact, or Explorations of a Field Biologist***, you may need “field clothes” – clothes that you don’t mind getting dirty. Also, plan on bringing the following: sunscreen, mosquito repellent, allergy medication if used, water bottle, extra socks, light-weight long pants, closed-toed shoes (sneakers/hiking boots/etc...not sandals,) raincoat, rain boots.
- Coin-operated laundry facilities are available in the Residence Hall. Please bring quarters if you plan to do laundry on campus.
- Some sporting equipment is available through the counseling staff (i.e. basketballs, soccer balls, etc.).
- There are several small drugstores and grocery stores within walking distance. Anything you ‘forget’ to pack, you can purchase once you are in Ann Arbor. You may bring your favorite snack foods and drinks as well.
- There are no refrigerators in the residence hall rooms, however, some counselors will have refrigerators with limited space. **Medication that needs to be refrigerated will be accommodated first.**

***Linens can be rented for an additional fee. Students who choose this optional service will receive 1 fitted & 1 flat sheet, 1 pillow with pillowcase, 1 blanket, 2 towels and 1 washcloth. These linens will be exchanged for a fresh set each week.**

****The University of Michigan is NOT responsible for any electronic devices brought from home to the MMSS program, and will not replace items if they are damaged or stolen.**

If you have any additional questions, please call (734) 647-4466 or email mmss@umich.edu.

Directions to West Quad Residence Hall and Welcome Reception

A campus map has been enclosed, with the residence hall and Michigan Math and Science Scholars administration location highlighted. We recommend that Google Maps or MapQuest be used for exact directions.

West Quad Residence Hall

West Quad Residence Hall is located at 541 Thompson Street, Ann Arbor, MI 48109 on central campus near the Michigan Union. There are several parking lots in this area that you will be able to use free of charge on Sundays.

Residential students should plan to arrive to the residence hall between *1:30 – 3:00 pm* to check-in. You will be able to leave your bags in your dorm room while attending the Welcome Reception. MMSS counselors will be on hand to assist you. **Please see page 19 for more information regarding arrival and departure times for residential students.**

Click here for more info: <http://www.housing.umich.edu/undergrad/west-quadrangle-cambridge-house>

East Hall, Mathematics Atrium

East Hall (**530 Church Street, Ann Arbor, MI 48109**) is located near the corner of South University Avenue and Church Street. Please enter the building at the Mathematics entrance facing Church Street.

Parking can be found in the Church Street Parking Garage that is across from East Hall. This parking garage, along with all other University and Ann Arbor lots, has free parking on Sundays.

If you have any questions or need additional directions, please contact the MMSS office at (734) 647-4466 or by e-mail at mmss@umich.edu

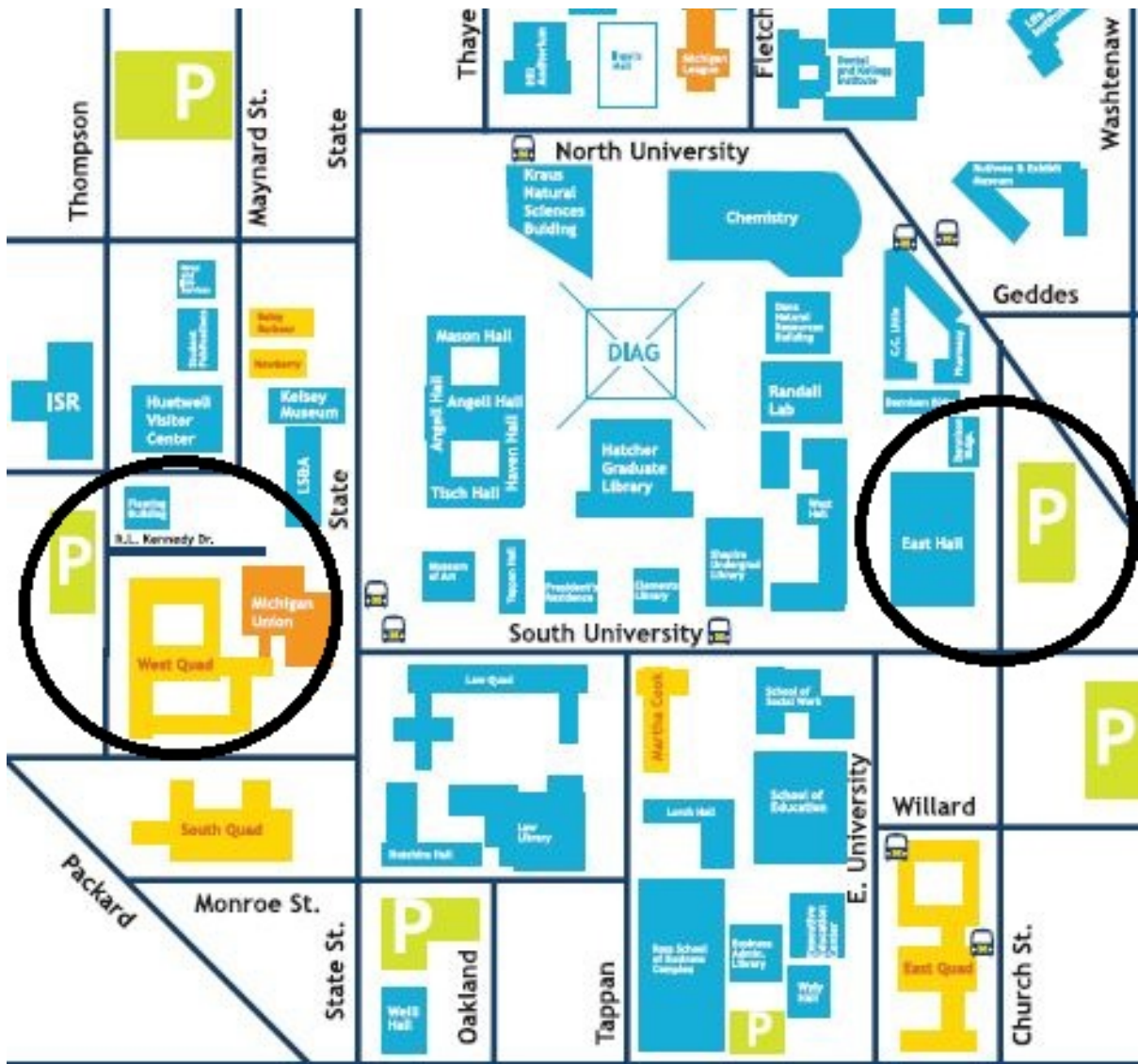
During the Welcome Reception, MMSS faculty and course assistants will be available for discussion and questions. Faculty will also meet with their students in small groups with the possibility of a classroom tour. The Welcome Reception is optional for parents, and mandatory for all students.

NOTE: There will be a **MANDATORY RESIDENTIAL STUDENT orientation 5:00 pm - 6:00 pm** in room 1360 East Hall following the Welcoming Reception. This mandatory orientation is for students only; parents will be dismissed at 5:00pm. Food and beverages for dinner will be provided to students.



LSA

MICHIGAN MATH AND
SCIENCE SCHOLARS
UNIVERSITY OF MICHIGAN



<https://campusinfo.umich.edu/campusmap>

EAST HALL ADDRESS:

**530 Church Street
Ann Arbor, MI 48109**

WEST QUAD HALL ADDRESS:

**541 Thompson Street
Ann Arbor, MI 48109**

Information for RESIDENTIAL Participants

1. **HOUSING:** Students will reside in West Quad Residence Hall on Central Campus (541 Thompson Street, Ann Arbor, MI), a short walk to Central Campus where all MMSS courses will be held.
 - Participants will be housed in double rooms by gender. Male and female students will have separate areas of the building.
 - **The rooms are equipped with desks, chairs, beds, dressers, and lamps. Linens are NOT PROVIDED, so each student will need to pack twin extra-long sheets, a pillow, and blankets (a sleeping bag will also suffice).**
2. **LAUNDRY:** Coin operated laundry facilities available in the residence hall.
3. **PACKAGES AND MESSAGES:** Mail may be sent to students at the following address:

Student Name- MMSS

West Quad Residence Hall

541 Thompson Street

Ann Arbor, MI 48109-2016

General Information: 734-764-0185

Website: <http://www.housing.umich.edu/undergrad/west-quadrangle-cambridge-house>

Messages may be left for students by calling the West Quad Hall front desk at 734-764-0185 until 10:00 p.m. or by sending an e-mail to mmss@umich.edu. Your student will be given the message as soon as possible. All students will also be assigned umich.edu email addresses and have daily access to computers on campus.

In the event of an emergency after hours, students can be contacted at the residential hall by dialing the Department of Public Safety at **(734) 763-1131**. They will contact your student.

4. **DINING INFORMATION:** Three meals daily, breakfast, lunch and dinner (**lunch and dinner only on the weekends, pack snacks!**), are provided for residential students in [South Quad Dining Hall](#).
 - **DIETARY RESTRICTIONS:** The dining hall will accommodate special food requests to cater to allergies and religious beliefs. For more information regarding the dining hall, please click here: <http://dining.umich.edu/menus-locations/dining-halls/south-quad/>
5. **SUPERVISION:** Male and Female MMSS counselors will occupy rooms in the same area as students. Counselors will supervise the residential students from 4:30 pm each evening through breakfast the next day. They are available throughout the night as necessary and reside in the residence hall throughout the entirety of the program.
 - Students will be under the supervision of MMSS faculty, graduate/undergraduate student associates, or counselors at all times.

Information for RESIDENTIAL Participants – Continued

6. **VEHICLES:** Residential students are prohibited from bringing vehicles to campus. MMSS personnel will transport students on outings in University vehicles or on licensed chartered busses or public transportation.
7. **TEMPORARY DEPARTURE FROM CAMPUS:** A written request will need to be on file with administration before students will be excused from campus (i.e. doctor appointments, dinner plans, etc).
 - The MMSS program requires written permission of the parent/guardian to allow a residential student to leave with someone other than the guardian. Also, if you are planning to do an activity with your child, we require advance notification in writing.
 - Online requests can be made via the MMSS website homepage beginning in June: <http://www.math.lsa.umich.edu/mmss/>
8. **SPENDING MONEY:** It is strongly recommended that students bring an ATM, debit, or credit card.
 - Students may wish to spend money at the Ann Arbor Summer Festival (group outings), on outings to local concerts or films (accompanied by MMSS personnel--no film rated higher than PG-13 will be permitted), and on outings to roller rinks, bowling alleys, Cedar Point Amusement Park, Briarwood Mall, purchase snacks, UM memorabilia, etc.
 - Automatic Teller Machines (ATMs) for all major and most local banks are available and they are located in several locations on central campus, including inside the Michigan Union and Michigan League.
9. **RELIGIOUS SERVICES:** Central Campus is within walking distance of houses of worship for most major religions. MMSS personnel will support and assist students in attending religious services as best as possible and within reason.
10. **ITEMS TO PACK:** Casual dress, cool weather clothing, rain gear, personal toiletries, linens, towels and face cloths, swim suits, beach towels, tennis rackets and balls, baseball gloves, cameras, alarm clocks, radios. Please see, “What to Bring” on page 15.
11. **DEPARTURE FROM CAMPUS:** Students may be picked up from West Quad Residence Hall after classes conclude on the second Friday of each session at 12:00 pm. PLEASE PLAN TO LEAVE CAMPUS NO EARLIER THAN 1:00PM ON THE FRIDAY OF DEPARTURE in order to provide travel time from campus to the airport/train station/bus station.
 - **If traveling by air, please purchase flights with a departure of 3:00 pm or later.**
 - Session 1 will end on **Friday, July 10** at approximately 12:00 pm
 - Session 2 will end on **Friday, July 24**, at approximately 12:00 pm
 - Session 3 will end on **Friday, August 7**, at approximately 12:00 pm
 - See page 23 for the MMSS program’s airport shuttle service information.

Information for RESIDENTIAL Participants – Continued

12. **EXTRA CURRICULAR ACTIVITIES:** MMSS will occur during the Ann Arbor Summer Festival. The Summer Festival sponsors concerts and films every night. A very popular aspect of the Summer Festival with the MMSS is Top of the Park. This is a free film series, shown outdoors every night during the Festival on the roof of a parking garage on campus. Most of the films are big hits from previous decades; all of them are suitable for people of all ages. Other successful activities of past years include: ice skating, picnicking, trips to the community swimming pool, bowling, and other activities yet to be finalized.

Pre-Arranged events administered by MMSS are as follows:

- [Cedar Point Amusement Park](#)
(\$65 per student, purchase through student portal)
 - Session 1: Saturday, July 4
 - Session 2: Saturday, July 18
 - Session 3: Saturday, August 1
- [Detroit Tigers Baseball Game](#)
(\$40 per student, purchase through student portal)
 - Session 1: Sunday, July 5
 - Session 2: Sunday, July 19
 - Session 3: Sunday, August 2

The costs for the respective field trips include the price of transportation by charter bus and advance payment admission. **PLEASE SELECT AND PAY FOR EACH INTERESTED EVENT ASAP OR BY MAY 1 IF INTERESTED IN PARTICIPATING IN THE OFFERED EVENTS.**

Those students that are attending two sessions are welcome to take the trips on both weekends. ***We book buses for transportation for these trips so seats are limited for each trip planned.***

Alternate activities will be planned for those that wish to remain in Ann Arbor for the specified days.

13. **EARLY ARRIVALS/LATE DEPARTURES:** Residential students should plan to arrive to the residence hall between 1:30 – 3:00 pm on the first Sunday of their session to check-in. Students should plan to check out by 12:00 pm (noon) on the final Friday of their session. Students traveling by air from a distance of more than 2,000 miles, who are unable to find flights that allow for the aforementioned arrival times, may check in and/or out within a 24 hour window of those times, for a \$50 extra-night fee per night. ***If you need an early check-in and/or late check-out, you MUST enter your travel information on the student portal at least 3 weeks prior to your session start date. If you enter your travel information later than that date and are in need of an early check-in, you will be charged a late fee of \$50, in addition to the \$50 extra-night fee.***
14. **ADDITIONAL INFORMATION:** For more information regarding dining and housing, please click here: [West Quad](#) and [South Quad Dining Hall](#).

Information for COMMUTER Participants

1. **SUPERVISION:** MMSS faculty, graduate/undergraduate student associates, and counselors will supervise students at all times.
 - At 4:30 pm each day, commuter students must be picked up, as **commuter students are not permitted in the residence hall** unless participating as a Residential student. This rule is in place to assure safety and accountability.
2. **MEAL PLAN:** Tuition for commuter students includes one pre-loaded meal card that will provide lunch for 9 days (the final Friday of each session ends at Noon) at [South Quad Dining Hall](#). All MMSS students will attend lunch together Monday-Friday, 12:00 pm – 1:30pm.
 - **DIETARY RESTRICTIONS:** The dining hall will accommodate special food requests to cater to allergies and religious beliefs. For more information regarding the dining hall, please click here: <http://dining.umich.edu/menus-locations/dining-halls/south-quad/>
3. **VEHICLES:** It is not recommended for students to provide their own transportation when commuting from surrounding areas.
 - **Students who must bring cars to campus will have to use local public parking facilities. Public Parking is extremely limited and costly at approximately \$15 (or more) per day.**
 - The Ann Arbor Transportation Authority (AATA) bus service is readily accessible from the University of Michigan campus to the outlying areas of Ann Arbor, Chelsea, Dexter, Saline, and Ypsilanti. Information about bus schedules and passes can be found on the AATA website at <http://theride.org/>
4. **WEEKEND ACTIVITIES:** Commuter students are welcome to participate in pre-arranged extra curriculum activities offered on the weekends.
 - The costs for the respective field trips include the price of transportation by chartered bus and advance payment admission.
 - **PLEASE PURCHASE TICKETS ASAP OR BY MAY 1 THROUGH THE STUDENT PORTAL IF YOUR STUDENT WOULD LIKE TO PARTICIPATE IN ANY OF THE FOLLOWING TRIPS.**
 - [Cedar Point Amusement Park](#)
(\$65 per student, purchase through student portal)
Session 1: Saturday, July 4
Session 2: Saturday, July 18
Session 3: Saturday, August 1
 - [Detroit Tigers Baseball Game](#)
(\$40 per student, purchase through student portal)
Session 1: Sunday, July 5
Session 2: Sunday, July 19
Session 3: Sunday, August 2
 - MMSS personnel will accompany students on outings in University vehicles or on licensed transportation. Commuter students are to arrive at West Quad Hall (541 Thompson St., Ann Arbor, MI) the morning of each scheduled event.

Airport/Train/Bus Shuttle Information

ALL TRAVEL INFORMATION MUST BE SUBMITTED VIA THE STUDENT PORTAL, “TRAVEL PLANS” TAB IN ORDER TO RECEIVE SHUTTLE SERVICE.

The MMSS program staff will be responsible for providing transportation to residential participants. Shuttle services can be provided both to and from Detroit Metro Airport and the Ann Arbor train or bus stations (bus and train are no cost but require entry of arrival/departure times).

If you are interested in utilizing MMSS Shuttle Services, and have not yet selected this service, please proceed to the MMSS student portal, “Additional Services” category, and select “Airport Shuttle”. **When purchasing a one-way or round-trip shuttle service, keep in mind:**

- *After* purchasing the “Airport Shuttle”, select the “travel plans” tab and enter flight information. **Be sure to include flight numbers, dates, times of departure/arrival, and the best contact number for the day of arrival. PLEASE NOTE THAT COUNSELORS ARE NOT ABLE TO CALL INTERNATIONAL PHONE NUMBERS. WE STRONGLY ADVISE INTERNATIONAL PARTICIPANTS TO PURCHASE AN INTERNATIONAL PHONE PLAN FOR THEIR TIME AT MMSS.**
- If the flight, train or bus is late, we will keep someone at the terminal to meet the student. **We track all flights/train schedules in order to ensure transportation is provided.**
- Once students arrive at the airport, train station, or bus station, **students are to proceed directly to the baggage claim (INTERNATIONAL STUDENTS NEED TO EXIT THE BAGGAGE CLAIM DOORS!) to find an MMSS staff member (note: you will NOT be greeted at the gate but instead at baggage claim.)** Please do not leave the airport/transportation station on your own.
- Shortly after you have found an MMSS Counselor, who will be wearing a yellow shirt, you will retrieve your luggage. MMSS staff member will escort you to a University of Michigan van, where you will then be shuttled back to campus (about a 30 minute drive from the airport). Once you arrive at West Quad Residence Hall (541 Thompson Street, Ann Arbor, MI 48109), follow indicating signs MMSS Check-In signs. Counselors will be present to assist you.
- At the completion of MMSS, a staff member will coordinate with students to schedule drop-off at the appropriate time and airline gate.
- **UNACCOMPANIED MINOR POLICY:** Most airlines have a policy that requires children under the age of 15 to fly as ‘unaccompanied minors’. The airlines request the name of the pick-up person and their contact information in relation to students flying as unaccompanied minors. The MMSS program is unable to provide this information more than 24 hours in advance, which can lead to long delays and major inconveniences for both the student and MMSS staff. **AS SUCH, WE STRONGLY ADVISE AGAINST STUDENTS FLYING AS UNACCOMPANIED MINORS!**