# UNIVERSITY OF CINCINNATI DITLE PROGRAM

# 2018 Summer Program Application

## Student Personal Information

1. Name (First Middle Last)
2. Email Address
3. Phone Number
4. Date of Birth (MM/DD/YY)
5. Gender (check one)

* Female
* Male
* Other

1. Ethnicity (check one)

* American Indian or Alaskan Native
* Asian or Pacific Islander
* Black/African American
* Hispanic/Latino
* White/Caucasian
* Other (please specify)

1. Religion (Optional)
2. Dietary Restrictions
3. How did you hear about the UC DITLE Program?

* High School Teacher/Counselor/Principal
* High School Friend
* University of Cincinnati Staff/Faculty
* Media/Website
* Family/Community Member
* Other (please specify)

## Student High School Information

1. High School (select one)

* Aiken High School
* Hughes STEM High School
* Oak Hills High School
* Taft Information Technology High School
* Walnut Hills High School
* Withrow University High School
* Shroder High School
* Other (please specify)

1. Current Year in High School (2016-2017)

* Freshman
* Sophomore
* Junior

1. Cumulative GPA
2. Current Math Class and Letter Grade in the Class (2016 1st Semester)

|  |  |
| --- | --- |
| Class Name | Letter Grade (A,B,C,D,F) |
|  |  |

1. All Previous High School Math Classes and Grades

|  |  |
| --- | --- |
| Class Name | Letter Grade (A,B,C,D,F) |
|  |  |
|  |  |
|  |  |

1. Test Scores (if taken)

|  |  |
| --- | --- |
| Test | Score |
| OGT |  |
| OAA |  |
| Pre-ACT |  |
| Pre-SAT |  |
| ACT |  |
| SAT |  |
| SCPP |  |
| Other – please specify |  |
| Other – please specify |  |

1. Please explain your IT knowledge and experience, if any
2. Rate your IT knowledge level

* 0 – Not comfortable using a computer
* 1 – Comfortable using a computer and common applications/Internet
* 2 – Comfortable troubleshooting computer/networking issues AND/OR creating websites/formulas/using advanced applications
* 3 – Comfortable building computers/networks AND/OR programming applications

1. What do you hope to gain from the summer camp?

## Student Household Information

1. Emergency Contact Information
   1. Name
   2. Phone Number
   3. Email Address
2. Household Income (check one)

* Less than $24,999
* $25,000 – $49,999
* $50,000 - $99,999
* $100,000 or more

1. Language spoken at home
2. Number of people living in your household including yourself
3. Number of people living in your household over the age of 21. List details for each person in the table below.

|  |  |
| --- | --- |
| Household Members over 21 | |
| Person 1 | |
| Name (First Last) |  |
| Relationship to Self |  |
| Highest Education Level (check one) | * 12th grade or less(no diploma) * GED * High school diploma * Some college (no degree) * Associate or technical degree * Bachelor’s degree * Graduate degree/professional |
| Current Employment Status (check one) | * Working Full Time * Working Part Time * Homemaker * Looking for Employment * Retired * Other (please specify) |
| Person 2 | |
| Name (First Last) |  |
| Relationship to Self |  |
| Highest Education Level (check one) | * 12th grade or less(no diploma) * GED * High school diploma * Some college (no degree) * Associate or technical degree * Bachelor’s degree * Graduate degree/professional |
| Current Employment Status (check one) | * Working Full Time * Working Part Time * Homemaker * Looking for Employment * Retired * Other (please specify) |
| Person 3 | |
| Name (First Last) |  |
| Relationship to Self |  |
| Highest Education Level (check one) | * 12th grade or less(no diploma) * GED * High school diploma * Some college (no degree) * Associate or technical degree * Bachelor’s degree * Graduate degree/professional |
| Current Employment Status (check one) | * Working Full Time * Working Part Time * Homemaker * Looking for Employment * Retired * Other (please specify) |
| Person 4 | |
| Name (First Last) |  |
| Relationship to Self |  |
| Highest Education Level (check one) | * 12th grade or less(no diploma) * GED * High school diploma * Some college (no degree) * Associate or technical degree * Bachelor’s degree * Graduate degree/professional |
| Current Employment Status (check one) | * Working Full Time * Working Part Time * Homemaker * Looking for Employment * Retired * Other (please specify) |

If needed, please write in additional family members over the age of 21.

Student Signature:

Legal Guardian Signature:

High School Liaison Signature:

**Please type the application information if possible and send to Scott Gibbons at** gibbonsp@mail.uc.edu **or via mail to:**

School of Information Technology

DITLE Program

Scott Gibbons

2610 McMicken Circle

Cincinnati, OH 45221