



Dear Parents and Guardians,

We are pleased to support your student in BEAM (Berkeley Engineers and Mentors) during the 2012-2013 School Year. BEAM is a free after school program sponsored by the University of California, Berkeley and taught by Berkeley engineering and science students.

Our goal is to introduce your child and his/her classmates to engineering, science and technology concepts. Over the course of the next 10 weeks, your child will participate in a weekly session where he/she will work on hands-on projects that teach them these concepts through experimentation and design. They will work closely with current UC Berkeley students who will act as mentors. We encourage you to visit the program in action at your child's school and see your child take on the role of a scientist.

Each child will be asked to complete a survey at the start and end of the program to help us evaluate BEAM. We will also interview some of the children to get their feedback on how to better serve them. Individual information will be confidential and results will be described for the group only. If you do not wish for your student to be interviewed, please contact us by emailing beam.teach@gmail.com or contacting your child's school.

Meeting Day/Time:

Teacher:

In the past three years of BEAM's existence, parents and students have told us that BEAM has had a very positive impact in helping expand students' confidence and interest in science and engineering. We are counting on your support to help make BEAM a continued success, and we look forward to meeting you in the future.

Sincerely,
Elaine Polson and Kriti Sondhi
Co-Presidents of BEAM
beam.berkeley.edu

Keep this page for reference.

Please return the rest of the packet to school with your child by _____.

BEAM CONTACT & INFORMATION FORM

Please fill out the following information. This will help us keep in touch with you to let you know about fieldtrips and other BEAM events.

Student Information

Student Name

School

Grade

____/____/____
Student birth date

Allergies (if any)

Have your child been in BEAM before? ☐ Yes ☐ No

If yes, at which school(s)? _____

Parent Information

Parent Name

Home phone number

Work phone number

Cell phone number

Email address

How would you prefer we contact you? ☐ Phone ☐ Email

If you would like materials translated, please indicate the language: _____

For research and data purposes, please indicate your annual household income (optional):

☐ Less than \$20,000 ☐ \$20,000 - \$39,999 ☐ \$40,000 – 59,999 ☐ \$60,000 - \$79,999 ☐ Over \$80,000

BEAM CONTRACT

We will:

- Introduce students to technology, science, and engineering in a program that is both educational and fun.
- Introduce students to role models who will share their exciting work in technology, science, and engineering
- Offer resources and guidance to help students and their families plan for a college-bound future.

Students will:

- Regularly attend their BEAM program
- Complete surveys at the start and end of each semester
- Be respectful of students and instructors and fully engage in activities

Families will:

- Support their student's participation in program meetings
- Encourage students to apply the concepts they learn at home and other environments

We agree to carry out all project responsibilities described.

Student's name (print)

Student's signature

Parent/Guardian's name (print)

Parent/Guardian's signature

Date

BEAM

PARENT/GUARDIAN MEDIA RELEASE FORM

I, _____, hereby give permission for my child/ward,
(parent, guardian) (please print)

_____, to appear in photos, films, videos, web site, or other media sponsored
(full name) (please print)

by University of California's Berkeley Engineers and Mentors (BEAM) program, to be taken at my student's school and other locations. I understand that participation in this event is purely voluntary and without compensation, and that all material and images from this photo/film/video session(s) or other media will be owned solely by University of California's BEAM program. I hereby give permission to BEAM to use images for education materials, brochures, website images, video materials, marketing, and other uses to support the BEAM program.

I release the University of California, Berkeley and BEAM from any and all liability for property damage, theft, or personal injury to my child/ward/self during or by reason of this activity. I authorize those in charge to furnish reasonable emergency treatment during this activity for my child/ward/self for which I will be responsible.

Signature of Parent or Guardian

Date