Instructions for Students: How to Apply to Berkeley Math Circle Summer Program 2016

Instructions:

This application is for students:
- In grades 6-12 who wish to enroll in the BMC Summer Program 2016, OR
- In grades 5 or below AND currently enrolled in BMC-Upper in Spring 2016.

I. For which Berkeley Math Circle Summer Program Level should I apply?

Please, use the following table to decide which level to enroll is best for you. Rare exceptions will be considered only for younger advanced math circlers wishing to move up a level. If you are enrolled this Spring 2016 at a certain BMC group beyond your grade, you may apply to that level or higher:

<table>
<thead>
<tr>
<th>Your Fall 2016 Grade</th>
<th>Sign up for:</th>
</tr>
</thead>
<tbody>
<tr>
<td>6th grade</td>
<td>Beginners</td>
</tr>
<tr>
<td>7th grade</td>
<td>Intermediate I</td>
</tr>
<tr>
<td>8th – 10th grades</td>
<td>Intermediate II</td>
</tr>
<tr>
<td>11th – 12th grades</td>
<td>Advanced</td>
</tr>
</tbody>
</table>

II. What forms do we need to submit?

The enrollment form to the BMC Summer Program 2016 includes the following 5 or 7 items, fully completed, signed and dated (to save paper, submit double-sided forms):

1. Enrollment Form: include BOTH pages and sign.
2. BMC Rules of Behavior and Expectations Form: include BOTH pages and sign.
3. Consent Form: include BOTH pages and sign.
4. Photo Release Form: include the single page and sign.
5. A check: Please read instructions below for addressing and filling the check correctly.
6. ONLY for students NOT enrolled at BMC-Upper in spring 2016:
   6A: Latest School Report Card, with grades/remarks in math, science, and behavior, and
   6B: Recommendation Letter from your current Math Teacher, sealed in a closed enveloped.

Staple together forms 1,2,3,4 (pp. 3-9) in the above order. Do NOT staple the check to the forms.

III. Can we include siblings on the same form and check?

No. For every student, you must include a separate enrollment form, and a separate check. Do NOT combine together checks and forms for siblings: we need separate ones for each child.

IV. Instructions for Check

Along with the four forms above, include a check:
- for $380 (for Early Bird Discount; received in the office Evans 713 by March 15th, 2016);
- OR for $400 (for Regular Fee; received in the office Evans 713 on or after March 16th, 2016).
- Pay to the order of: United Math Circles Foundation
- Memo: BMC Summer [Level], [Student], e.g., “BMC Summer, Int. II, John Doe”.

Do NOT write “BMC” in the “Pay to” line: we do NOT have an account named BMC; such checks will bounce back. Incorrectly written checks shall be shredded by BMC staff: do NOT ask for your incorrect checks back. This money is a registration fee. Thus, once your check has been deposited, it cannot be refunded, cannot be rolled over to a future semester, or used in any other way.

Date: Feb. 21st, 2016
Pay to the order of: United Math Circles Foundation
Amt: $400
Memo: BMC Summer, Int. II, John Doe
V. **Whom do we give the application to?**

Give in person at the math circle or mail the completed application packet and checks to:

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Berkeley Math Circle  
Attn: Prof. Zvezdelina Stankova  
Department of Mathematics  
Room 970, Evans Hall  
University of California, Berkeley  
Berkeley, CA 94720-3840
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Note that enrollment forms and checks that are sent by mail may not arrive by the March 15th Early Bird Discount. So, the best way to get everything to us is in person during the math circle or **slide under the door of Evans 713** in a sealed and addressed envelope.

VI. **How do we know if we are accepted into the program?**

We will put every effort into accepting all applying students. If we reach capacity and your application comes afterwards, we will let you know within 2 weeks of receiving the application.

- Incomplete applications or missing a check shall **NOT** be considered.
- **Once the spaces are filled, we will stop accepting more applications for the BMC summer program 2016.**
- We will not deposit your check unless we have officially added your child to the summer Program. If a student has been accepted, we will notify you via email within 2 weeks of receiving the application.
**Instructions for Students: How to Apply to Berkeley Math Circle Summer Program 2016**

**http://mathcircle.berkeley.edu**

**Instructions:**

This application is for students:
- In grades 6-12 who wish to enroll in the Berkeley Math Circle Summer Program 2016,
- OR
- In grades 5 or below AND currently enrolled in BMC-Upperm in Spring 2016.

1. **Student:**

   - **First Name**
   - **(MI)**
   - **Last Name**
   - **Student's E-mail** (Please, TYPE legibly.)
   - **Student's Address:** **Street**
   - **City/Zip Code**
   - **Grade in Fall 2016:** ________
   - **Applying to BMC Summer Program Level:**
     - Beginners □
     - Intermediate I □
     - Intermediate II □
     - Advanced □

     (If students find one level not suited for them, they may switch to another level only with permission of BMC staff.)

2. **Parent:**

   - **First Name**
   - **(MI)**
   - **Last Name**
   - **Parent’s E-mail** (Please, TYPE legibly.)
   - **Parent’s Phone**

3. **Current School in Spring ’16**

   - **School Address**
   - **City/Zip Code**
   - **Teacher’s Name**
   - **Teacher’s Phone or E-mail**

4. **School in Fall ’16**

   (if different from current school)

   - **School Address**
   - **City/Zip Code**
4. **For statistical purposes**, we need to gather demographic information on the BMC Summer Program participants. We will report only summarized data, and no responses will be associated with any particular student.

- Gender: Male □ Female □
- What race/ethnicity do you most identify with?
  - African-American □ Asian □ Caucasian □ Indian □ Latino □ Other: __________________________
- What kind of school do you go to? Public □ Private □ Charter □ Homeschooled □

*We have answered all questions above completely and truthfully.*

Parent or Legal Guardian Signature: __________________________ Date: __________

Parent or Legal Guardian Name in Full: __________________________________________

Student Signature: __________________________ Date: __________

Student Name in Full: __________________________________________
By joining the Berkeley Math Circle Summer Program (BMC Summer Program), students and parents agree to abide by the following rules:

1. **COME ON TIME.**
   - Sessions will begin every morning at 9:00am sharp and end by 12 noon.
   We strongly discourage late arrivals since not only are there often important announcements at the beginning, but also since they are disruptive to the sessions.

2. **COME PREPARED.**
   - Bring a notebook dedicated just to the BMC Summer Program. Students must learn to take notes at the sessions.
   - Bring pencils, pens, and erasers.
   - Bring rulers, compasses, and graph paper for geometry lessons.

3. **BEHAVE APPROPRIATELY.**
   - No food or drink in the lecture rooms.
   - No running/playing in the hallways, elevators or other places in the building.
   - Conversation in the hallways must be kept to a minimum. No shouting or speaking loudly.
   - Follow the instructions of the session speaker and BMC staff.
   - Be engaged in the classroom activities—no working on school homework, reading outside material, surfing the web, using a cell-phone, playing games, or sleeping.
   - Maintain a classroom environment conducive to learning—stay in your seat, do not talk while the session speaker or a called-upon-student is presenting, and certainly, no horseplay. Respect your peers, the speaker, and anyone else in the classroom.
   - No doodling on the desks/tables or walls, or destroying/damaging in any way room furniture, equipment and facilities on campus.

4. **CLEAN UP AFTER YOURSELF.**
   - After every session, clean up your desk/table and around it; pick up any paper, pencils, or other tools and leftovers, and deposit all trash in the trash bins in the room or corridor.

The Berkeley Math Circle reserves the right to exclude a student from summer Program participation and to refuse enrollment to the summer Program and to the math circle in the future, if the student’s behavior is deemed by BMC staff to be detrimental to the purposes of the summer Program.
5. **EXPECTATION OF STUDENTS.**

During this first BMC Summer Program, we expect students to master:

- Between **65%-100%** (around 75% on the average) of the material in sessions closely related to school curriculum, such as Geometry and Algebra.
- Between **40%-100%** (around 60% on the average) of the material in specialized sessions such as Combinatorics, Problem Solving, and other topics.

6. **FOR PARENTS.**

- No parents are allowed in the summer Program rooms, except officially designated room parents.
- Room parents help all children equally and do not sit if there is a shortage of chairs for the students.
- There is no provision to supervise children outside of the sessions, so parents must stay with their children until the beginning of the session to monitor their behavior and safety. **Unattended children** (whether enrolled in the summer Program, siblings or friends) are **not allowed** in the building or on Campus.
- Conversation in the hallways must be kept to a minimum. No shouting or speaking loudly.
- Parents must pick up children promptly at the end of sessions by 12 noon.

7. **STAFF EMAIL ONLY FOR EMERGENCIES.**

Due to the huge size of the circle and volume of emails, we have **restricted the staff e-mails** (e.g., of the director, the assistants, the monthly contest coordinators, and other BMC staff) **only to EMERGENCIES.** If you have any questions for us that can be answered in person, you are welcome to drop by at the office Evans Hall 713, UCB Campus, between 9:15-11:45am on Tuesdays during the sessions of the summer Program. Between 8:45-9:15pm we are busy opening classrooms and setting up the circle sessions, so these 30 minutes are not a good time to ask us questions. If you wait until the next day of the summer Program, you can ask parents and very likely you will receive detailed answers from them to all or most of your questions.

8. **NON-RELEASE OF PERSONAL INFORMATION.**

We do **NOT** distribute students/parents e-mails, addresses or other personal information to third parties, or to parents or students in the circle. If you wish to carpool, you need to inquire from parents during the sessions.

*We have carefully read the above BMC Summer Program rules and agree to abide by them.*

Parent or Legal Guardian Signature: __________________________ Date: __________

Parent or Legal Guardian Name in Full: __________________________

Student Signature: __________________________ Date: __________

Student Name in Full: __________________________

Student applies to Summer Program group (check one):  
- Beg. □  
- Int. I □  
- Int. II □  
- Adv. □
Consent Form

Berkeley Math Circle Summer Program 2016

To parents/guardians of students:

It is necessary to accurately complete and sign this form in order for your child to participate in the Berkeley Math Circle Summer Program (BMC Summer Program) in 2016.

The Berkeley Math Circle Summer Program in 2016 will be on the following days:
- June 20, 21, 22, 23, 24, 27, 28, 29, 30, and July 1.
- The BMC Summer Program will be led by instructors from around the Bay Area.
- By registering for participation in BMC Summer Program in 2016 all parents and students are agreeing to uphold the tenets in this document.

1. I understand that there are risks and dangers inherent in participating and/or receiving instruction in the Berkeley Math Circle Summer Program. I also understand that in order to be allowed to participate and/or receive instruction at BMC I must give up my rights to hold The Regents of the University of California, Mills College, University of San Francisco, Mathematical Sciences Research Institute, United Math Circles Foundation, any other participating institutions, and the BMC staff liable for any injury or damage which I or my child may suffer while participating and/or receiving instruction at the BMC Summer Program.

2. Knowing this, and in consideration of being permitted to participate and/or receive instruction in BMC Summer Program, I hereby voluntarily release The Regents of the University of California, Mills College, University of San Francisco, Mathematical Sciences Research Institute, United Math Circles Foundation, any other participating institutions, and the BMC staff from any and all liability resulting from or arising out of my or my child's participation and/or receipt of instruction at BMC Summer Program.

3. I understand that students participating in any of the sessions and activities of the BMC Summer Program agree to abide by all decisions made by and regulations imposed by BMC staff, instructors, and BMC designated chaperones. Students who do not do so, or who fail to observe reasonable rules of good conduct, may have their participation terminated.

4. **Medical Emergencies.** I must notify below the BMC staff of any serious health conditions my child has (including allergies). I understand that the BMC Summer Program does not have the capabilities necessary for handling medical emergencies. In case of health problems, we require one of the parents/guardians of the child to be immediately available and present throughout the duration of the sessions of the circle, and to immediately take charge in case of a medical emergency related to the child. Although food and drinks in the classrooms are prohibited, the BMC staff cannot guarantee their absence from the circle sessions and their vicinity.

Please, list serious medical conditions (including allergies): ______________________________________

If applicable, the parent or adult representative must bring all medications to the summer math Program in their original container.

Will your child need any medication during BMC Summer Program (Monday-Friday, 9AM - 12PM)? □ Yes □ No

If Yes, list the medications here: __________________________________________________________

Please, be aware that the BMC Staff does NOT have the resources to dispense medication during the summer math Program. The parents take full responsibility for medications for their children during the summer math Program.

Please provide your Physician and Insurance Information below. **We cannot accept any students to the BMC Summer Program who do not fill out the below information.**

Physician's Name: ___________________________ Medical Insurance Company: ___________________________

Physician's Phone Number: ___________________________ Medical Insurance ID Number: ___________________________
5. I understand that The Regents of the University of California, Mills College, University of San Francisco, Mathematical Sciences Research Institute, United Math Circles Foundation, any other participating institutions, and the BMC staff make no warranties of any sort concerning the safety of the students during travel to and from the sessions of the BMC summer Program. The transportation to and from the BMC summer Program rooms is the responsibility of the students and parents.

6. I understand that The Regents of the University of California, Mills College, University of San Francisco, Mathematical Sciences Research Institute, United Math Circles Foundation, any other participating institutions, and the BMC staff make no warranties of any sort concerning the security of student property or possessions. The belongings of each student are the responsibility of that student alone.

7. I understand and agree that I am releasing not only The Regents of the University of California, Mills College, University of San Francisco, Mathematical Sciences Research Institute, United Math Circles Foundation, any other participating institutions, and the BMC staff, and Berkeley Math Circle, but also their officers, agents, and employees of those entities.

8. I understand and agree that this Consent Form will have the effect of releasing, discharging, waiving, and forever relinquishing any and all actions or causes of action that I may have or have had, whether past, present or future, whether known or unknown, and whether anticipated or unanticipated by me, arising out of my participation and/or receipt of instruction at BMC summer Program except for the acts or omissions of The Regents of the University of California, Mills College, University of San Francisco, or Mathematical Sciences Research Institute, United Math Circles Foundation, any other participating institutions, and the BMC staff, their officers, agents or employees which are found to be negligent by a court of competent jurisdiction.

9. I understand and agree that this Consent Form applies to personal injury, property damage, or wrongful death, which I may suffer, even if caused by the acts or omissions of others.

10. I understand and agree that by signing this Consent Form, I am assuming full responsibility for any and all risk of death or personal injury or property damage suffered by me while participating and/or receiving instruction at BMC summer Program.

11. I understand and agree that this Consent Form will be binding on me, my spouse, my heirs, my personal representatives, my assigns, my children and any guardian ad litem for said children.

12. I understand and agree that by signing this Consent Form, I am agreeing to release, indemnify and hold The Regents of the University of California, Mills College, University of San Francisco, Mathematical Sciences Research Institute, United Math Circles Foundation, any other participating institutions, and the BMC Staff, Berkeley Math Circle, and their officers, agents, and employees harmless from any and all liability or costs, including attorneys fees, associated with or arising from my participation and/or receipt of instruction in BMC summer Program.

13. I understand and agree that if I am signing this Consent Form on behalf of my minor child, that I will be giving up the same rights for said minor as I would be giving up if I signed this document on my own behalf.

Student Name in Full: __________________________________________________________
Student Signature:__________________________________________________________Date:______________

I or We __________________________________________________________(email____________________________)
(Parent(s) or Legal Guardian(s) Name(s))
the parents of __________________________________________________________,
(Student Name in Full)
have read, understood and agree with the above Consent Form concerning my child's participation in the Berkeley Math Circle Summer Program.

Parent or Legal Guardian Signature:__________________________________________Date:______________
Parent or Legal Guardian Name in Full: __________________________________________
Parent or Legal Guardian Signature:__________________________________________Date:______________
Parent or Legal Guardian Name in Full: __________________________________________

8 | P a g e
It is necessary to accurately complete and sign this form in order for your child to participate in the Berkeley Math Circle Summer Program 2016.

I or We __________________________________________ (email______________________________),
(Parent(s) or Legal Guardian(s) Name(s))
hereby give permission to the Berkeley Math Circle and its officers to take and use photos of my child,
________________________________________________ (student name in full),
taken before, during or after the circle sessions, or during other functions and events related to the Berkeley Math Circle Summer Program. The photos can be used on the Berkeley Math Circle website, or in internal documentation, such as reports and applications for academic and financial support for the Berkeley Math Circle and its summer Program, or promotion materials advertising the circle and the summer Program. Any usage outside of the stated here will require further permission from me.

E-mail and other personal information about students and parents will not be shared with third parties or with other students/parents, unless permission is received from me.

Student Name in Full: ________________________________________________________________

Student Signature:__________________________________________________________ Date:________

Parent or Legal Guardian Signature:_______________________________________ Date:________

Parent or Legal Guardian Name in Full: _________________________________________

Parent or Legal Guardian Signature:_______________________________________ Date:________

Parent or Legal Guardian Name in Full: _________________________________________

TURN OVER
Final Check List
Berkeley Math Circle Summer Program 2016
http://mathcircle.berkeley.edu

Instructions:

This application is for students:
- In grades 6-12 who wish to enroll in the Berkeley Math Circle Summer Program 2016, OR
- In grades 6 or below AND currently enrolled in BMC-Upper in Spring 2016.

Before you submit your application, check that you have included the following 7 pages (pp. 3-9):

- **Application Form**: BOTH pages, signed (pp. 3-4).
- **BMC Summer Program Rules of Behavior and Expectations Form**: BOTH pages, signed (pp. 5-6).
  Did you save a copy of the BMC Rules and Expectations Form for review by parents and students?
- **Consent Form**: BOTH pages, signed (pp. 7-8).
- **Photo Release Form**: single page, signed (p. 9).
- **A check for $380 for Early Bird Registration by March 15, 2016, or $400 after March 15, 2016.**
  Did you write *Pay to Order, “United Math Circles Foundation” and “BMC Summer Program ’15, [your child’s name]” on the memo line? Checks without “Foundation” will not be accepted by the bank and will be considered late.

Did you:

- **Staple all 4 forms** (pp. 3-9) to each other in the above order? Please, **do NOT staple your check** to the forms, and **do NOT include the instructions** (pp. 1-2) in your application packet.
- **Include a separate application packet** and a **separate check** for each child?
- **Give in person at the math circle, slide under the door of Evans 713 in a sealed and addressed envelope, or address the application packet to:**

  **Berkeley Math Circle**
  Attn: Prof. Zvezdelina Stankova
  Department of Mathematics
  Room 970, Evans Hall
  University of California, Berkeley
  Berkeley, CA 94720-3840

- Make sure that application packet will arrive by March 15, 2016 for Early Bird Registration.
- Review BMC Summer Program Rules & Expectations with your child BEFORE the summer Program.

Is your child:

- **In 1st - 5th grades in fall 2016 and NOT enrolled currently in BMC-Upper in spring 2016?** If yes, this is NOT the correct application.
- **In 6th - 12th grades in fall 2016 OR currently enrolled in BMC-Upper in spring 2016?** If yes, you have completed the correct forms. We will not deposit your check unless we have officially added your child to the student list. If a student has been accepted, we will notify you via email. We will not be confirming the receipt of individual applications, so please have patience until we make the enrolment decisions.