

INSTRUCTIONS

Below are the required forms that must be completed in order for your child to participate in the Sandia National Laboratories STEM Programs (Manos, Dream Catchers or HMTech):

(PAGE 2) Student Code of Personal Conduct & Permission to Photograph Student

(PAGE 3) Release & Indemnity Agreement

Parents and student participants read, print, sign and submit these 2 forms at registration before student is allowed to participate in the program.

APPLICATION: 2015 Dream Catcher Science Program

If possible please register online (see bottom of page). Otherwise please complete and return this form. Please print using a black or blue pen. Please indicate your order of preference (from #1 to #3) for the class sessions you desire. Each student will be enrolled in one class based upon availability. If your #1 preference is filled, then you will be assigned your #2 (or beyond) as available.

	Using PM to Get Things Done!
	Introduction to Computer Programming – Building Tomorrow’s Technology Today
	Lego Robotics!

Student Name: _____
Last First Middle

Parent/Guardian Name: _____
Last First Middle

Contact Phone Number: (____) _____ Contact Email Address: _____

Contact Mailing Address: _____

Student School: _____ Student Grade Level (2015/16 year): _____

Are you a past applicant: Yes No
 Are you a past participant: Yes No
 If yes, please specify year(s) & class(es): _____

The following is optional voluntary information that does not affect program participation. This data is used solely for statistical purposes inside Sandia.

Gender: Male Female
 Ethnicity: American Indian; Black; Asian; Hispanic; Non minority
 As applicable, Tribal Affiliation: _____

A complete application requires: (1) this 2015 DCSP Application form,
 (2) the Student Code of Personal Conduct, and
 (3) the Release Form

You will be notified by email (if email provided) or by mail (if no email provided) by **June 1, 2015** as to your application status and enrolled class session.

Registration Deadline: Monday, June 1, 2015

Online: <https://share.sandia.gov/stem/dreamcatchers/>

Fax: 505-284-9374, Attention: Marie Capitan

Email: (scan and send to) fmcapit@sandia.gov

Mail: Marie Capitan, DCSP Program Manager
 Office Phone: 505 284-3171
 Sandia National Laboratories
 PO BOX 8500, MS 0159
 Albuquerque, NM 87185-0159



Student Code of Personal Conduct



Sandia National Laboratories

Student Name (Printed)

Student participants are expected to conduct themselves responsibly. They are expected to obey volunteer instructors/ teachers/coordinators, remain in designated areas and classrooms, fully participate in activities, respect other participants, and comply with universal school dress code.

Failure to engage in responsible conduct may result in removal from the program.

Conduct including, but not limited to, the following is improper and grounds for **complete removal from the program**:

1. Striking another individual,
2. Using threatening or abusive language,
3. Behaving indecently,
4. Vandalizing (including graffiti) school facilities or classroom equipment/materials, which may be result in referral for criminal prosecution.
5. Possessing drugs or alcoholic beverages.
6. Consuming food or beverages in prohibited classrooms or computer labs.

Conduct including, but not limited to, the following is improper and grounds for **removal from the program for the day**:

1. Being insubordinate to program staff (volunteers, instructors, teachers, coordinators).

We, the undersigned, have read and understand the above Student Code of Personal Conduct. Our signatures constitute agreement with the regulations.

Date

Signature of Student Participant

Date

Signature of Parent/Legal Guardian

Permission to Photograph Student

I hereby give permission for the above-named student to have his/her picture taken while participating in activities associated with Sandia National Laboratories STEM programs. Said pictures become the sole property of Sandia Corporation which operates Sandia National Laboratories and will be used only for program advertisement and recruiting/information-sharing purposes.

Date

Signature of Parent/Legal Guardian

RELEASE FORM

I. Voluntary Participation

I, _____, acknowledge that my child, _____ is
(Parent or Legal Guardian) (Student's name)
voluntarily participating in a Sandia National Laboratories STEM program (Manos, Dream Catchers, HM Tech).

II. Assumption of Risk

I have been fully advised that there exist potential risks incidental to my child participating in the STEM program.. These risks may include, depending on the workshop, burns, scrapes, and exposure to household chemicals. I am aware that certain of these dangers and hazards may be incidental to the activities involved in these instructional classes. I also realize that not all of the risks and hazards of these activities are known. I give my permission for my child to participate in this activity with knowledge of the possible risks involved of personal injury or property damage and verify this statement by placing my **initials here**: _____

I understand that it is my personal responsibility to judge the suitability of my child's participation in this class(es) and verify this statement by placing my initials here: _____

III. Release

As consideration for my child being permitted to participate in the above-described instructional class(es) and use of the facilities, I hereby agree that I, my assignees, heirs, distributees, guardians, and legal representatives will not make a claim against the Sandia Corporation which operates Sandia National Laboratories (Sandia) or Albuquerque Public Schools or any of its agents, officers, employees, subcontractors, or instructors (independent contractors, or otherwise) for any personal injury or property damage resulting from negligence or other acts, howsoever caused, by any employee, officer, agent, subcontractor, or instructor (independent contractor or otherwise) of Sandia or Albuquerque Public Schools as a result of my child's participation in the above-described class(es). I hereby release Sandia, and Albuquerque Public Schools, its agents, officers, employees, subcontractors, or instructors (independent contractors or otherwise) from all actions, claims, causes of action, or demands, known or unknown, fixed or contingent, that I, my assignees, heirs, distributees, guardians, and legal representatives may have or may hereafter have for personal injury or property damage resulting from my child's participation in the above-described instructional class(es).

It is my intention to exempt and relieve Sandia National Laboratories/Lockheed Martin and Albuquerque Public Schools, and its agents, officers, employees, subcontractors, and instructors (independent contractors or otherwise) from liability for personal injury or property damage from negligence or other acts, howsoever caused. I verify this statement by placing my initials here: _____

IV. Knowing and Voluntary Execution

I have carefully read this Agreement and fully understand its contents. I am aware this is a release of liability and a contract between myself and Sandia National Laboratories and sign it of my own free will. I am fully aware of the legal consequence of signing this document.

V. Indemnity

I agree that in the event any claim for personal injury or property damage shall be prosecuted against Sandia, its agents, officers, employees, subcontractors, instructors (independent contractors or otherwise), I, my assignees, heirs, distributees, guardians, and legal representatives shall hold Sandia, Albuquerque Public Schools, its agents, officers, employees, subcontractors, instructors (independent contractors or otherwise), harmless from any and all claims or causes of action by whomever or wherever made or presented for personal injuries or property damage.

Date

Signature of Student Participant

Date

Signature of Parent/Legal Guardian