



WASHINGTON  
SPACE GRANT

# PIERCE COLLEGE SCIENCE DOME



2024

August 5-8 and 12(or 13), 14  
9am-4pm

(Launch day is dependent on weather and may be  
August 12th or 13th from approx. 7am-10pm)

## Application for High Altitude Balloon Camp (HS Student)

Supported by Washington NASA Space Grant Consortium, Pierce College Science Dome, and Pierce College Student Achievement Support Services (SASS)

**Due By June 7th**

Please email or mail completed application to one of the addresses below:  
Email: ScienceDome@pierce.ctc.edu (please include "Space Camp" and Participant's name in subject line)  
Mail: Pierce College Science Dome, 9401 Farwest Dr., Lakewood, WA, 98498

### Participant Information

**Participant Name:** \_\_\_\_\_  
First Last Nickname (optional)

**Gender Identity or Pronouns:** (examples: she/her, he/him, they/them) \_\_\_\_\_

**Name of School:** \_\_\_\_\_ **Grade:** (for the upcoming school year) \_\_\_\_\_

**Participant Email:** \_\_\_\_\_

**Residential Address:** \_\_\_\_\_  
Street Address City, State, Zip Code

### Parent/Guardian Information

**Parent/Guardian 1:** \_\_\_\_\_  
Name Relationship to Participant Phone

**Parent/Guardian 2:** \_\_\_\_\_  
Name Relationship to Participant Phone

**Emergency Contact:** (Must be available all day on camp days) \_\_\_\_\_  
Name Phone

**Parent/Guardian Contact E-mail Address:** \_\_\_\_\_

### Other Information

Is there anything else we should know about you to ensure the best possible experience?

## Application for Space Camp Admission (High School Student)

### Demographics

This information is only used for demographic purposes and is reported to our sponsors.

**Did you receive (or were you eligible to receive) free/reduced school lunch this past year?**

Yes                      No

**If you attend college, will you be a first generation college student?** Being a first generation student means that your parent(s) did not complete a 4-year college or university degree, regardless of other family members' level of education.

Yes                      No

**Race:** Please check all that apply.

- Asian
- Latino/Hispanic/Spanish Origin
- African American/Black
- Native American/Alaska Native
- Native Hawai'ian and/or Pacific Islander
- Middle Eastern or North African
- White/Caucasian
- Other (please specify) \_\_\_\_\_

**Do you have a disability?**

The ADA defines a disability as, "a physical or mental impairment that substantially limits one or more major life activity".

Yes

No

I'd rather not say



## **Application for Space Camp Admission (High School Student)**

### ***Personal Statement***

This section is required for the application and must be filled out by the student only. If you need more space for your answers, please use a separate sheet of paper and include it with your application.

**Why do you want to go to space camp?**

**What do you consider to be your greatest achievement? Feel free to be creative! Your achievements don't have to be limited to academic success!**

## **Application for Space Camp Admission (High School Student)**

Please either return this page to the student to submit with their application, or email it to us directly at ScienceDome@pierce.ctc.edu (please include "Space Camp Recommendation" and Participant's name in subject line)

**Due by June 7th**

*High Altitude Balloon (HAB) Camp is a project-based camp in which students will have 7 days to construct, test, launch, and analyze data from their very own HAB. This camp includes a one-day trip to Central Washington University, where students will launch and retrieve the HAB. This is a great opportunity to learn useful skills and see their project reach the edge of space!*

### ***Recommendation (to be filled out by the Recommender)***

This section **must** be submitted to complete the application. Recommendations can be made by a current or former teacher or other educational faculty or staff member at the Participant's current school (or former school if the Participant is entering high school this upcoming year or has recently started at a new school).

**Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**School:** \_\_\_\_\_

**Position and subject(s) taught:** \_\_\_\_\_

**In your opinion, why would this student be a good fit for our space camp program and how do you think this program will benefit the student?**

Please limit your answer to one paragraph.

**Recommender Signature:**

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Name (first and last)

Date