



ILLINOIS MATHEMATICS AND SCIENCE ACADEMY® PROMISE PROGRAM

Providing Opportunities for Mathematics and Science Enrichment



Summer Enrichment for Academics in Mathematics and Science - SEAMS

"SEAMS has been a wonderful experience for me both academically and socially and can be described in only one word...AWESOME!"

"I've been to a few camps before and SEAMS is by far the best. I've learned more from SEAMS than I ever expected to learn."

"I have really enjoyed my stay here. The challenges excited my love for learning again...The time here was really fun and interesting."

Illinois Mathematics and Science Academy®
1500 West Sullivan Road
Aurora, Illinois 60506-1000
www.imsa.edu
1-800-500-IMSA (4672)
diversity@imsa.edu

IMSA®



ILLINOIS MATHEMATICS AND SCIENCE ACADEMY
A Pioneering Educational Community

SEAMS APPLICATION

(Please type or print legibly in black ink)

SECTION I. To be completed by Student and mailed to the Academy

1. Full Name: Legal Last Legal First MI

2. Mailing Address: Street # Street Apt # Area Code Telephone #
City State Zip E-mail

3. Male Female

4. Enter your Date of Birth in the boxes Month Day Year

5. Enter your city, state and country of birth:

6. Are you a permanent resident of Illinois? Yes No

If you are not a permanent resident of the state of Illinois: explain the circumstances that establish your eligibility to attend Illinois public schools:

Note: Citizenship is not a requirement for program application or program attendance.

7. Enter your current year in school in the box to the right: (e.g. 8th)

8. Enter the county in Illinois in which you reside:

9. What language(s) is (are) spoken in your home?

Is English your first language? Yes No

If English is not your only language, how long have you spoken English? Years Months

OPTIONAL

10. Check your ethnic code in the box(s) below:

- (1) American Indian or Alaskan Native: Ancestral origin in North America and maintaining cultural identification through tribal affiliation or community recognition (Please attach copy of CIB or Tribal enrollment card.)
(2) African American - Ancestral origin in any of the black racial groups of Africa
(3) Asian or Pacific Islander - Ancestral origin in Far East, Southeast Asia, Indian subcontinent, or the Pacific Islands (including China, Japan, Korea, the Philippine Islands, and Samoa)
(4) Latino - Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish ancestral origin regardless of race
(5) Caucasian - Ancestral origin in Europe, North Africa, or the Middle East
(6) Biracial or Multiracial (Please specify from above # # # #)
(Ethnic information is requested so that IMSA may demonstrate compliance with federal requirements.)

11. Write in the **full name** of parent/legal guardian with whom you live:

(Mr., Ms., Mrs., Dr.)	First Name	Last Name	relationship
(Mr., Ms., Mrs., Dr.)	First Name	Last Name	relationship
()	Parent/legal guardian contact phone number		Parent/legal guardian E-mail address

12. Write in the **full name** and address of your current school in the spaces below:

Official Name of School			
Street #	Street		
City	State	Zip	
()			
School Phone Number		School Web Site (if applicable)	

Do you qualify for free or reduced lunch at school? Yes No

SECTION II.

Attached are:

- copies of grade transcripts for last academic year and 1st semester of this academic year
- most recent standardized test score(s)

SECTION III. Please attach additional sheets if necessary. Include your name on all additional sheets.

13. List the **clubs, organizations and competitions** in which you have participated during the past three years and any leadership positions held within them. *Please list mathematics and science involvements first.*

Club/Organization/Competition	Level (Local, State, National)	Year(s) of Involvement	Leadership Position

14. List all **awards** you have won during the past three years. *Please list Mathematics and Science awards first.*

Name of Award	Award Level (Local, State, National)	Year(s) of Award

15. **SECTION IV.**

We indicate that the information given herein is true and accurate. We understand that withholding pertinent information on this application or giving false information will make the student ineligible for admission to the SEAMS program or subject to cancellation of registration if admission has occurred. We grant permission to release all student data in support of the application to the Summer Enrichment for Academics in Mathematics and Science program and for all application documents to be retained by the Academy. We recognize that SEAMS admission decisions are based on multiple criteria and we understand that admission into the SEAMS program does NOT guarantee admission into the Illinois Mathematics and Science Academy.

_____/_____
Applicant Signature (required) / *Date*

_____/_____
Parent/Legal Guardian Signature (required) / *Date*

Furthermore, as parent/legal guardian of the above named student, I support my son/daughter's application to the SEAMS program and agree to assist him/her in attending all sessions, completing assignments and to provide an adult family member to participate in the program as requested. I understand commitment to the program by both the student and the family is critical for promoting academic growth.

_____/_____
Parent/Legal Guardian Signature (required) / *Date*

A complete application file must include the following items:

- Written Application
- Mathematics *or* science teacher evaluation form (from 7th or 8th grade)
- Counselor/Principal evaluation form
- 7th grade transcript
- 8th grade transcript (1st semester)
- Most recent standardized test scores

Mail application materials to:

Office of Admissions – SEAMS
 Illinois Mathematics and Science Academy
 1500 W. Sullivan Road
 Aurora, IL 60506-1000

Please retain a photocopy of completed application for your records.

EQUAL OPPORTUNITY INFORMATION: State Government policy prohibits discrimination based on race, gender, color, creed, religion, national origin, age and ancestry, sexual orientation, political affiliation or disability. The sole purpose of gathering this information is to ascertain the effectiveness of recruitment efforts in reaching all segments of the population. IMSA's programs, services and activities are accessible to disabled individuals.

Student: Please detach, cut and attach one of these “requests for evaluation completion” letters to each of the evaluation forms for your Mathematics or Science Teacher and School Principal/Counselor.

Dear _____;

I am applying for admission to the **Illinois Mathematics and Science Academy’s (IMSA) SEAMS Program**, and I would like your evaluation of my preparedness for entrance into the this pre-admission program.

SEAMS is a two week, residential experience designed to improve students’ skills in mathematics, science and English. The academic curriculum emphasizes group inquiry and problem solving.

IMSA is a three-year (10-12) residential college preparatory program for Illinois students. IMSA offers more than 100 advanced courses in mathematics, science, the arts and humanities, with an emphasis on meaningful connections and integration. Personalized Learning Plans increase opportunities for students to deepen and strengthen their three-year academic experience. These plans also enable students to engage in learning unique to their interests, passions and future goals. The innovative Student Inquiry and Research Program enables students to pursue compelling questions of interest, conduct and present findings of original research, engage in entrepreneurial applied science and technology activities, and collaborate with other students, mentors, scholars, researchers and inventors throughout the world. IMSA’s unique schedule allows for special seminars lead by world “masters”, academic consultation with expert faculty, leadership, community and workservice opportunities. Dr. Leon Lederman, a Nobel Prize winning physicist, serves as IMSA’s resident scholar; their entire faculty hold advanced degrees with 44% holding a Ph.D. To promote collaboration, IMSA does not calculate grade point averages or class rankings. Tuition and most room and board expenses are provided by state funds. Some fees are charged, based on family income.

SEAMS admission is determined by grades, standardized test scores and qualitative factors, such as communication skills, demonstrated passion for math and/or science, and evaluations from a teacher and a principal/counselor. Your assessment is critical to my application, and I thank you in advance for the time and thoughtful attention given to this evaluation. All application materials (including your evaluation) are to be returned to IMSA.

Sincerely,

Student signature

Date



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Sincerely,

Student signature

Date

**For more information on
Illinois Mathematics and Science Academy's programs
serving the students and educators of Illinois, visit:**

www.imsa.edu

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MATHEMATICS or SCIENCE TEACHER EVALUATION OF APPLICANT - SEAMS

®

Legal Name of Applicant _____
(Please Print) Last Name First Name MI

INFORMATION RELEASE -- Complete this section before giving to the teacher.

I, the undersigned, hereby request that all data in support of my application to SEAMS be available to IMSA officials.

_____/_____
Applicant Signature Date

I, the undersigned, hereby waive my right to review any comments or information included in this evaluation form or their supporting documents. (optional)

_____/_____
Applicant Signature Date

As parent/legal guardian of the named student, I grant permission to release all school data in support of my son/daughter's application to SEAMS.

_____/_____
Parent/Legal Guardian Signature Date

As parent/legal guardian of the named student, I waive my right to review any comments or information included in this evaluation form or their supporting documents. (optional)

_____/_____
Parent/Legal Guardian Signature Date

CLASSROOM BEHAVIORS: Please include behaviors that indicate potential for the areas listed below.
(Attach additional page if more space is needed)

Please describe an example in which this candidate demonstrated exceptional **intellectual talent, knowledge, curiosity, creativity and/or leadership.**

Please provide a specific example in which this candidate demonstrated a true **passion for mathematics and/or science.**

Please provide an example in which this student **thought and acted outside of the "mainstream"** in relation to his/her **performance.**

Please describe this candidate's **willingness to work both in a group and independently.**

Please describe this candidate's **preparation and study skills development.**

Please describe this candidate's **reasoning ability and ability to communicate articulately about subject matter.**

In your opinion, does this candidate have a **serious interest** in studying mathematics and/or science? Yes No
 In your opinion, does this candidate have an **aptitude** for studying mathematics and/or science? Yes No

Comments: Please use this space to provide any additional information that IMSA should consider when evaluating this candidate's application to SEAMS, including your involvement with him/her outside the traditional classroom, his/her ability to meet personal responsibilities such as taking care of self, meeting deadlines, personal initiative, etc. Please also include any obstacles this student has had to overcome in pursuing his or her educational goals, if appropriate.

Do you think that this candidate's grades are a valid reflection of his/her academic abilities? Yes No
 If no, please explain:

PERSONAL QUALITIES	Outstanding	Good	Average	Below Average	No Basis for Judgment
General intelligence _____	_____	_____	_____	_____	_____
Reasoning ability _____	_____	_____	_____	_____	_____
Motivation and task commitment _____	_____	_____	_____	_____	_____
Self sufficiency _____	_____	_____	_____	_____	_____
Leadership _____	_____	_____	_____	_____	_____
Maturity _____	_____	_____	_____	_____	_____
Seeking of challenges _____	_____	_____	_____	_____	_____
Social adaptability and responsibility _____	_____	_____	_____	_____	_____
Academic risk taking _____	_____	_____	_____	_____	_____

Among the students I have encountered in my teaching career, in terms of mathematical and/or science reasoning, this student ranks in the (check one)
 ___ upper 1-2% ___ top 5% ___ top 10% ___ top 25% ___ top 50% ___ bottom 50%

Number of years teaching _____ How long have you known this candidate _____
 Which year(s) did you teach this candidate _____

Print Name of Person Completing this Form (Last, First):	Title:	Office Phone: ()
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Institution:	Signature:	Date:
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Address:	email:
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IMSA's programs, services, and activities are accessible to disabled individuals.
Please retain a photocopy of this form for your records and mail original directly to:

Office of Admissions - SEAMS
Illinois Mathematics and Science Academy
 1500 W Sullivan Road
 Aurora, Illinois 60506-1000
 Phone: (630)907-5028
 Within Illinois: 1-800-500-IMSA (4672)

Thank You!

COUNSELOR/PRINCIPAL EVALUATION OF APPLICANT-SEAMS



Legal Name of Applicant _____
(Please Print) Last Name First Name MI

To The Applicant: Please print your legal name, school name and address below and complete the release section. Give the signed form to your current counselor or principal, allowing enough time for thoughtful completion, and ask them to return it to IMSA.

INFORMATION RELEASE -- Complete this section before giving to the teacher.

I, the undersigned, hereby request that all data in support of my application to SEAMS be available to IMSA officials.

As parent/legal guardian of the named student, I grant permission to release all school data in support of my son/daughter's application to SEAMS.

_____/_____
 Applicant Signature Date

_____/_____
 Parent/Legal Guardian Signature Date

I, the undersigned, hereby waive my right to review any comments or information included in this evaluation form or their supporting documents. (optional)

As parent/legal guardian of the named student, I waive my right to review any comments or information included in this evaluation form or their supporting documents. (optional)

_____/_____
 Applicant Signature Date

_____/_____
 Parent/Legal Guardian Signature Date

Legal Name of Applicant (Last, First, Middle)		Current Grade Level	
School Name			
School Address (Street, City, Zip Code)			
School Type: <input type="checkbox"/> Public <input type="checkbox"/> Parochial <input type="checkbox"/> Charter <input type="checkbox"/> Independent <input type="checkbox"/> Home			
Superintendent's Name _____			
District type and number _____			
Total number of students enrolled in your school _____ . Please indicate which grades are taught at your school _____ .			
This candidate ranks _____ in a class of _____. No rank available <input type="checkbox"/>			
List English, Mathematics, and Science course titles in spaces below.			
Year School	English Course	Mathematics Course	Science Course
7th			
8th			

Does your school offer honors or accelerated courses or programs? Yes No

If *limited availability*, honors/accelerated courses or program, please explain _____

If yes, how are students identified for participation in these courses or programs?
(Please indicate if self-selection is permitted)

Is this candidate enrolled in honors courses? Yes No

Does your school follow a block scheduling format? Yes No

Has this candidate been subjected to any disciplinary action from school? Yes No

If yes, please explain: _____

Has this candidate had any excessive absences from school in the last two years? Yes No

If yes, please explain: _____

Please confirm that the following information is included with this completed form

- Last academic year Official Grade Report
- Current year Official Grade Report (1st Semester)
- Most recent standardized test score(s)
- School Profile (if available)

Print Name of Person Completing this Form (Last, First):	Title:	Office Phone: ()
--	--------	-------------------------

Address: _____ email: _____

Signature: _____ Date: _____

How many times have you met with this candidate _____

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 Phone: (630)907-5028
 Within Illinois: 1-800-500-IMSA (4672)

Return form and transcripts to IMSA.

Thank You!



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Aurora, Illinois 60506-1000
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The SEAMS Program is the first in a series of two pre-admissions programs to the Illinois Mathematics and Science Academy.

SEAMS is a two week, residential experience designed to improve students' skills in mathematics, science and English. The academic curriculum emphasizes group inquiry and problem solving.

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