ARCHITECTURE: SUMMER AT PENN APPLICATION

Apply online at www.jkcp.com/architecture

*Indicates required field

Student Information

FIRST NAME*   MIDDLE NAME   LAST NAME*

☐ MALE ☐ FEMALE

PREFERRED NAME (NICKNAME)   GENDER*   DATE OF BIRTH*

EMAIL ADDRESS*   HOME PHONE NUMBER

ADDRESS*   ADDRESS 2

CITY*   STATE/PROVINCE

COUNTRY*   ZIP/POSTAL CODE

Parent/Guardian Information

☐ MALE ☐ FEMALE

FIRST NAME*   LAST NAME*   GENDER*

DATE OF BIRTH*   EMAIL ADDRESS*

HOME PHONE NUMBER*   BUSINESS/WORK PHONE NUMBER   CELL/MOBILE PHONE NUMBER*

ADDRESS*   ADDRESS 2

CITY*   STATE/PROVINCE

COUNTRY*   ZIP/POSTAL CODE

How did you hear about Julian Krinsky Camps & Programs? (Please check all that apply.)

☐ **PREVIOUSLY ATTENDED A SUMMER PROGRAM WITH JKCP**

NAME OF PROGRAM

☐ **PERSON**
  ☐ Alumni   ☐ Coach or Pro   ☐ Friend   ☐ Teacher
  ☐ Foundation or Non-Profit ☐ Guidance or College Counselor ☐ Relative ☐ Other Person

  Please indicate the person's or organization's name and relationship:

  _____

  Please provide the person's email address or organization's website:

  _____

☐ **REFERRAL AGENCY**   Agency or Agent Name _____

☐ **ONLINE**   ☐ JKCP Site ☐ Penn or Wharton Site ☐ Other Site ☐ Search Engine ☐ Social Media ☐ Online Advertising

☐ **OFFLINE**   ☐ College/University ☐ Mailing ☐ Advertisement ☐ Event

☐ **OTHER**   _____

School Information

☐ 9 ☐ 10 ☐ 11 ☐ 12

SCHOOL CURRENTLY ATTENDING   CURRENT GRADE

ADDRESS   GRADUATION YEAR

CITY/STATE/ZIP   COUNTRY

PHONE   GUIDANCE OR COLLEGE COUNSELOR NAME

☐ PRIVATE ☐ PUBLIC ☐ PAROCHIAL ☐ HOME

TYPE OF SCHOOL   GUIDANCE OR COLLEGE COUNSELOR E-MAIL

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Please answer all of the following to the best of your ability.

Recommender Information

Please list two recommenders who will support your application for admission. We will contact each recommender to provide our letter of recommendation form. Recommendations will be used exclusively in the evaluation process and will be kept strictly confidential from both candidates and parents. At least one of the two recommenders should be a teacher from your school.

RECOMMENDER 1 NAME	PHONE	E-MAIL (REQUIRED)

POSITION /SUBJECT TAUGHT

RECOMMENDER 2 NAME	PHONE	E-MAIL (REQUIRED)

POSITION /SUBJECT TAUGHT

Student Questionnaire

List any extracurricular activities (sports, arts, community service, after-school classes, workshops, school newspaper, yearbook, special skills): _____

_____

_____

List any academic, community, or athletic honors or awards:_____

_____

_____

Briefly explain your interest in architecture in 200 words or less.

_____

_____

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What do you hope to accomplish during the program? What do you hope to gain from this experience? (answer question in 100 words or less)

_____

_____

_____

_____

_____

_____

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Application Requirements

The following application requirements must be submitted as soon as possible by mail, email or fax to:

ARCHITECTURE, 610 S. Henderson Road, King of Prussia, PA 19406
Email: architecture@jkcp.com • Fax: 610-265-3678

☐ **Letters of Recommendation:** We will e-mail recommenders directly to offer a letter of recommendation form.

☐ **Copy of Academic Transcript:** Must include Fall 2014 grades.

☐ **Please provide a line drawing, or sketch, in pencil of the interior or exterior of a building that you find architecturally interesting.** This drawing should be done on an 8 ½ by 11 inch white paper and scanned as a .jpeg or .pdf file. Once complete, you may upload directly in your online account or please email to architecture@jkcp.com.

☐ **Digital Identification Photo** is required for dorm and dining hall access. Photo guidelines will appear in your confirmation e-mail.

Your application is only considered complete when all of the above are received. Telephone interviews may be required after your application is complete.

Program Dates and Tuition

RESIDENTIAL STUDENTS

☐ July 5 – August 1* $5,975 (plus weekend stays)
(International Students may arrive July 4)
Fee includes tuition, housing, on-campus meals, course materials and equipment.
*Student exhibition will be held Friday, July 31, 2–4 p.m. Families welcome.

Additional Fees
• Nonrefundable application fee $75 (payable at time of application)
• Weekend Stay $600 ($200 per weekend)

DAY STUDENTS

☐ July 6 – July 31* $3,550
Fee includes tuition, lunch, weekday trips, course materials and equipment.
*Student exhibition will be held Friday, July 31, 2–4 p.m. Families welcome.

Additional Fees
• Nonrefundable application fee: $75 (payable at time of application)

Payment of Fees

An $500 deposit for residential students ($250 deposit for day students) plus a $75 nonrefundable application fee must accompany this application.** Please make your check payable to Julian Krinsky Camps and Programs and mail to: ARCHITECTURE, 610 S. Henderson Road, King of Prussia, PA 19406.

**If you are not accepted into the program, your deposit will be returned.

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Student Name: _____

By submitting this application, I understand, acknowledge and agree to the following:

Applications are confirmed in order of receipt and JKCP will notify me if my preferred session is not available. My application will not be considered complete until my application fee and deposit have been received.

Upon acceptance, my balance must be paid in full immediately. I agree to contact JKCP or make payment arrangements upon acceptance.

Any participant who fails to pay in full in accordance with the guidelines above may be subject to exclusion from participation.

Upon submission of this application, I will be given access to an online account and will be asked to use this online account to complete additional requirements. I may contact architecture@jkcp.com or 610.265.9401 for assistance with my online account.

By submitting this application, I acknowledge that I have read and understand the Terms and Conditions. I also confirm that I have reviewed the Terms and Conditions with my child. A complete copy of JKCP's Terms and Conditions can be found at www.jkcp.com/jk-terms-conditions . I may also request a full copy of the Terms and Conditions by email or mail by contacting architecture@jkcp.com or 610.265.9401.

_____
PARENT/GUARDIAN NAME (please print)

_____
PARENT/GUARDIAN SIGNATURE   DATE

_____
STUDENT NAME,

_____
STUDENT SIGNATURE   DATE