

APPLICANT INFORMATION

Applicant's Name _____
FIRST MIDDLE LAST

Date of Birth ____/____/____ Gender Female Male
MONTH DATE YEAR

Mailing Address _____
NUMBER AND STREET ADDRESS

CITY STATE ZIP

Home Phone (_____) _____ Cell Phone (_____) _____ E-mail _____

Race/Ethnicity (optional) Caucasian/White Native American/Native Alaskan
 African American/Black Hispanic/Latino Other
 Asian/Pacific Islander Multiracial

PARENT/GUARDIAN INFORMATION

Parent/Guardian 1 Name Dr Mr Ms _____
FIRST LAST

Address (if different) _____

Day Phone (_____) _____ Evening Phone (_____) _____ Cell Phone (_____) _____

E-mail _____

Parent/Guardian 2 Name Dr Mr Ms _____
FIRST LAST

Address (if different) _____

Day Phone (_____) _____ Evening Phone (_____) _____ Cell Phone (_____) _____

E-mail _____

PROGRAM HISTORY

Have you previously participated in a program of the Civic Education Project or the Center for Talent Development?

Yes Which program? _____ Last year attended _____ No

Were you a Midwest Academic Talent Search (MATS) participant? Yes No

How did you *first* hear about CivicWeek? Received Catalog Received Postcard Received E-mail

Fair/Presentation Internet Search Web Link _____ Advertisement _____

Teacher/Counselor _____ Friend/Relative _____ Other _____

ACADEMIC INFORMATION

High School _____ Current Grade 9 10 11 12
NAME CITY STATE

Please submit *either* a recent standardized test score *or* your cumulative grade point average.

(Academic information is optional for returning students.)

Test _____ Date _____ Verbal Composite _____

or Grade Point Average _____ on a _____ scale

To complete your application, you **must** enclose a copy of the test score or grade report.

Students who do not meet the test score or GPA requirements (see page 7) must also submit a recommendation form.

PROGRAM PREFERENCE

Please indicate the program for which you are applying. If you are willing to consider more than one program option, please rank your program preferences (1 being highest).

____ CivicWeek: New York Education & Youth Development in New York, New York (March 16–March 22, 2008)

____ CivicWeek: Chicago Public Health in Chicago, Illinois (March 24–March 30, 2008)

____ CivicWeek: San Francisco Hunger & Homelessness in San Francisco, California (March 24–March 30, 2008)

____ CivicWeek: Washington, DC Politics & Urban Poverty in Washington, DC (March 30–April 5, 2008)

FOR OFFICE USE ONLY				
App Recd _____	App Complete _____	Admit _____	Waitlist _____	Deny _____
Ck # _____	Date _____	Amt _____	FA App _____	PP App _____
			FA Award _____	

APPLICANT

Students who do not meet the test score or GPA requirements (see page 7) must submit a recommendation form. This form is not required for returning students or students who meet the test score or GPA requirements.

Please complete the information in this section and give this form to an adult who is familiar with your work in an academic, community service, and/or leadership context. You may wish to consider a humanities or social studies teacher, a guidance counselor, or a service club, honors society, student government, or youth group sponsor. The individual you choose should be able to speak to your intellectual ability, motivation, maturity, and leadership potential.

Your recommender should place this form in a sealed envelope with their signature over the seal and return it to you. You should include the sealed recommendation with your application, or if this is not possible, have your recommender submit it to us directly. Your application will not be processed until all materials have been received.

Applicant's Name _____
FIRST MIDDLE LAST

Mailing Address _____
STREET ADDRESS CITY STATE ZIP

Home Phone (_____) _____ **E-mail** _____

RECOMMENDER

The Civic Education Project is a leadership and citizenship development program for promising young people. Our CivicWeek programs bring together diverse groups of high school students for intense, weeklong, service-learning immersion experiences in host communities around the country. Each program combines meaningful service work, meetings with community leaders, group-building, reflection, and fun, in order to help young people develop the knowledge, experience, and leadership skills they need to make a positive impact on society.

CivicWeek is appropriate for outstanding students with an interest in service and a desire to develop their leadership and citizenship skills. Intellectual ability, motivation, maturity, and leadership potential are all important qualities we consider in student applicants. We would appreciate your thoughtful reflection on whether this student would succeed in this unique program. For more information about CivicWeek, please visit our web site at www.ctd.northwestern.edu/cep or contact us at 847-467-2572 or cep@northwestern.edu.

Recommender's Name Dr Mr Ms _____
FIRST LAST

School/Organization _____ **Title/Dept** _____

Mailing Address _____
NUMBER AND STREET ADDRESS

CITY STATE ZIP

Work Phone (_____) _____ **E-mail** _____

How long have you known the applicant, and in what capacity? _____

Please rate this applicant in the following areas by placing a check mark in the appropriate box.

	EXCEPTIONAL	EXCELLENT	GOOD	FAIR	POOR	N/A
Academic Achievement						
Academic Potential						
Intellectual Curiosity						
Oral Expression						
Critical Thinking Skills						
Motivation						
Interest in Service/Social Issues						
Maturity						
Responsibility						
Sincerity						
Respect for Authority						
Ability to Manage Stress/Conflict						
Ability to Work with Diverse Peers						
Demonstrated Leadership						
Leadership Potential						

CivicWeek Spring 2008 Recommendation Form *continued*

In the space below or on a separate sheet, please comment briefly on your assessment of this student in each of the following areas:

Academic Ability: CivicWeek students should be intellectually curious, prepared to engage in high-level discourse about challenging social issues, and able to discuss controversial topics in a thoughtful, meaningful way.

Maturity: CivicWeek students should be able to take responsibility for themselves, work well with diverse peers and community members, and be respectful of rules and authority. They should be open to new ideas and experiences, and able to address conflicts and obstacles in a reasonable manner.

Motivation & Leadership Potential: CivicWeek students should have an enthusiasm for service, an interest in learning about communities and social issues, and a desire to develop their leadership and citizenship skills. They should be committed to applying the lessons they learn in this program to become more active in their own schools and communities.

What concerns do you have (academic, emotional, or behavioral) about this student's ability to succeed in an intense, weeklong, service-learning immersion program?

Please rate the student's overall likelihood of succeeding in this program:

Very Likely Likely Somewhat Likely Unlikely Very Unlikely

RECOMMENDER'S SIGNATURE

DATE

Thank you for agreeing to submit a recommendation in support of this student's application to CivicWeek.

Please place this recommendation in a sealed envelope with your signature over the flap and return it to the student, or if this is not possible, send it to us directly by fax or at the address below.

This student's application will not be processed until all materials have been received.

For full consideration, all application materials must be received by **February 15, 2008**.

Please allow seven days for delivery.

Civic Education Project
CivicWeek Admissions
617 Dartmouth Place
Evanston Illinois 60208-4175
Fax 847-491-3394

OVERVIEW

CEP aims to ensure that our programming is accessible to all students who wish to attend, regardless of financial circumstances. A limited amount of need-based financial aid is available. Students seeking aid are also encouraged to apply for the payment plan, as financial aid awards typically do not cover the entire tuition fee.

APPLICANT INFORMATION

Applicant's Name _____
FIRST MIDDLE LAST

Mailing Address _____
STREET ADDRESS CITY STATE ZIP

Home Phone (_____) _____ E-mail _____

FAMILY INFORMATION

Parent 1 Name _____ Occupation _____

Employer _____ Address _____

Parent 2 Name _____ Occupation _____

Employer _____ Address _____

Names & Ages of Other Children _____

Parents' Marital Status Single Married Separated Divorced Widowed

Applicant Receives Free Lunch Program Reduced Lunch Program Neither

FINANCIAL INFORMATION

INCOME	2007	2008 (est)		VALUE	DEBT	EXPENSES	2007	2008 (est)
Parent 1 Wages			Cash/Savings/Checking			Mortgage/Rent		
Parent 2 Wages			Home			Medical Expenses		
Business Income			Business			Educational Expenses		
Child Support/Alimony			Investments			Other Expenses		
TANF			Other					
Other Income								

How much can your family contribute toward the tuition for this program? _____

How much will your family be able to secure through outside sources of support? _____
 (e.g. school, religious or community organizations, etc.)

STATEMENT OF NEED

Please attach a statement describing in detail the nature of the need for aid. Focus on financial concerns and problems that would prevent the student from attending should aid not be awarded.

SUPPORTING DOCUMENTATION

To verify the financial information in this application, please submit:

- Copy of first and second pages of most recent Federal Income Tax Return filed for the household
- Statement of need (see above)

Send this form with the rest of your application materials for receipt by **February 15, 2008**.
Early application is strongly encouraged, as funds are limited and are granted on a rolling basis.
 Applicants will not be considered for financial aid until all admissions and financial aid materials have been received.

Civic Education Project
 CivicWeek Admissions
 617 Dartmouth Place, Evanston IL 60208-4175
 Fax 847-491-3394

OVERVIEW

A four-month payment plan option is available to all students. The amount covered by the payment plan is equal to the total tuition and fees less the application fee, tuition deposit, and any financial aid awarded. Families who do not apply for financial aid, or apply for but do not receive financial aid, will be assessed a service charge of \$25 for using the payment plan. The service charge will be added to the first payment of the plan. Families who receive financial aid will not be assessed a service charge for using the payment plan. The first payment of the payment plan is due upon the student's acceptance to the program, and subsequent payments are due on the 15th of each month following.

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FIRST MIDDLE INITIAL LAST

Mailing Address _____
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Home Phone (_____) _____ E-mail _____

CREDIT CARD INFORMATION *(Required for ALL payment plan applicants)*

All payment plan participants **must** include valid credit card information to be eligible for the payment plan. If you choose the credit card option for monthly payments (see below), this credit card will be charged according to the payment plan schedule included in the acceptance packet. If you choose the check or money order option for monthly payments, this credit card information will be kept on file and will be used **only** in the event that an account becomes delinquent. In the event that a scheduled payment is missed, the entire remaining tuition balance will be charged to the credit card below.

Credit Card Type Mastercard Visa

Credit Card Number _____ Expiration Date _____
MUST EXPIRE AFTER 12/31/08

Name on Credit Card _____ Billing Address Zip Code _____

PAYMENT OPTIONS

I wish to make monthly payments by check or money order.

Please send monthly payment plan coupons with the acceptance packet.

I wish to make monthly payments by credit card.

Please charge the credit card above according to the payment plan schedule included in the acceptance packet.

CERTIFICATION

I would like to use the payment plan to pay the tuition and fees assessed for my child to participate in CivicWeek if he/she is accepted. I have read the information above and agree to abide by all program rules and policies. I further understand that the Civic Education Project will charge the credit card account designated above in the event that a scheduled payment is missed. I understand that should my child withdraw from the program less than two weeks before the program start date or be sent home from the program for any reason, I am still responsible for completing all payments.

PARENT/GUARDIAN SIGNATURE

DATE

SIGNATURE OF CARDHOLDER *(if different)*

DATE

Send this form with the rest of your application materials for receipt by **February 15, 2008**.
Please retain a copy for your records.

Civic Education Project

CivicWeek Admissions

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