



14TH CONGRESSIONAL DISTRICT

Application for Appointment to the
STEM SCHOLARS PROGRAM



Student Information

Name: _____ Birthdate: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Email: _____ Cell Phone: _____

School Attending: _____ Grade: _____

Application Checklist

To submit your application for the STEM Scholars program, all completed applications must include:

- Student Application Checklist (this page with Photo Release & Emergency Contact)*
- Expression of interest, "Why do you want to be a STEM Scholar?" (500 words max)*
- Essay, "What challenge facing youth merits greater public attention?" (500 words max)*
- Resume, including a list of activities, accomplishments, and awards*
- Letter of recommendation from teacher or mentor*

I understand that the information I have provided above may be verified.

Signature: _____ Date: _____

Parental Consent

I hereby authorize my daughter/son to participate in the STEM Scholars Program. I understand that services are offered on a voluntary basis. I agree to assume all risks for injuries resulting from my daughter/son's participation in volunteer activities.

Parent/Guardian Signature: _____ Date: _____

*Please scan and submit application electronically to: Congressman Randy Hultgren
Attn: STEM Scholars Coordinator at IL14STEMScholars@mail.house.gov*

Emergency Contact Information

This information will be extremely helpful in the event of an accident or medical emergency.

Primary Emergency Contact Name:

Relationship:

Cell Phone:

Home Phone:

Email:

Secondary Emergency Contact Name:

Relationship:

Cell Phone:

Home Phone:

Email:

Please list any special medical or personal information you would want an emergency care provider to know:

Photo Release Form for Minors

Congressman Randy Hultgren and staff associated with the Hultgren Office have my permission to use and publish my, or my child's photograph in the media or other official communications platforms, such as the Hultgren Office website, newsletter, press releases, social media, etc., including the World Wide Web, to promote the Illinois 14th Congressional STEM Scholars Program. I understand that I will receive no compensation for any photos taken.

Parent/Guardian Signature:

Date:

Parent/Guardian's Name:

Student's Name:

Date:
