



2011 Stayover Student Application

**STUDENT INFORMATION:** Please fill out completely

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_ M.I. \_\_\_\_\_

INTENDED MAJOR (circle one that applies): \_\_\_ VBSC \_\_\_ IID \_\_\_ TOX \_\_\_ ANSCI \_\_\_

*In order to be eligible for this program, you have to have a Penn State offer of admission for **one** of the above listed majors.*

HOME ADDRESS: (include street address) \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CELL PHONE: ( ) \_\_\_\_\_ EMAIL: \_\_\_\_\_

HIGH SCHOOL: \_\_\_\_\_

**T-SHIRT SIZE:** Please select your t-shirt size.

- Small
- Medium
- Large
- Extra Large

**PARENT/GUARDIAN INFORMATION:** Please fill out completely

**Parent/Guardian 1**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

HOME PHONE: ( ) \_\_\_\_\_ CELL PHONE: ( ) \_\_\_\_\_

**Parent/Guardian 2**

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

HOME PHONE: ( ) \_\_\_\_\_ CELL PHONE: ( ) \_\_\_\_\_

**EMERGENCY CONTACT:** In case of an emergency during the stayover, parent(s)/guardian(s) will be called first. If we are unable to reach you, please list at least one additional person we can notify.

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

HOME PHONE: ( ) \_\_\_\_\_ CELL PHONE: ( ) \_\_\_\_\_

## STUDENT AGREEMENT

The Stay Over Committee members have been diligently working to make your visit to Penn State's University Park Campus possible. We would like you to have the best possible experience while you participate in this program. In return, we would like you to agree on the following standards that we feel strongly about:

I, \_\_\_\_\_

- ✓ **I agree to attend all scheduled events sponsored by the Pre-Vet Club and Biomedical Sciences Club at Penn State.**
- ✓ **Failure to attend the scheduled events, I understand that the Penn State University, Departments of Veterinary and Biomedical Sciences, and Dairy and Animal Science, or Pre-Vet Club/Biomedical Sciences ARE NOT responsible for my actions or whereabouts;**
- ✓ **I agree to abide by all residence hall regulations. The following are prohibited: possession and use of alcohol and other drugs; possession of fireworks, guns and other weapons; stealing; violence of any kind; maliciously breaking or damaging the property of others; gambling; leaving campus without permission; behavior that is considered disruptive, or potentially harmful to oneself and/or to others. Smoking is banned in all University buildings, and we would prefer that students do not smoke while attending this program.**
- ✓ In case of illness, see one of the staff immediately – the student will be taken to the Student Health Center or the Emergency/Outpatient Department of Mount Nittany Medical Center.
- ✓ In-room visitation for the participants is restricted to persons of the same gender.
- ✓ **Students are permitted to have electronic devices (i.e. cell phones, ipods), however, they must be turned off during programmed events and in classrooms.**

STUDENT NAME (please print): \_\_\_\_\_

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

## REGISTRATION

**Registration Deadline:** March 11, 2011 (Note: Registration is on a first-come, first-served basis. Space is limited and the event typically fills prior to the deadline.)

**Confirmation of Registration:** Confirmation of registration and payment will be emailed (if an email has been provided).

**Fees and Payment:** The cost to attend the 2011 Pre-Vet/Biomedical Sciences Stayover is \$35 per student.

**Cancellation:** No refunds will be provided for cancellations after **March 11, 2011.**

**Enclosed is a check or money order for the amount indicated, payable to PENN STATE.  
(Note: Check must accompany application in order for your registration to be complete.)**

**PARENT/GUARDIAN PERMISSION**

- ✓ I, the undersigned, as a parent and/or guardian of \_\_\_\_\_  
the above student, a minor, ask that he/she be admitted to participate in the Pre-Vet Club and Biomedical Sciences Club Stayover sponsored by the Departments of Veterinary and Biomedical Sciences and Dairy and Animal Science at Penn State. In consideration of such admission, I do hereby agree to release, discharge, and hold harmless The Pennsylvania State University, its officers, agents, and employees of and from all causes, liabilities, damages, claims, or demands whatsoever on account of any injury or accident involving the said minor arising out of the minor’s attendance at the Stayover or in the course of activities held in connection with the Stayover.
  
- ✓ In the case of illness or injury, I hereby authorize the clinical staff at Student Health Center and the Mount Nittany Medical Center to provide care to my minor daughter/son for routine diagnostic procedures (i.e. x-rays, blood and urine tests) and medical treatment. In the event that an illness or injury will require extensive evaluation, I understand that every reasonable attempt will be made to contact me. However, in the event of an emergency, and if I cannot be reached, I give my consent to perform any necessary emergency treatment. (The Penn State University does not provide medical insurance to registrants. In the event of illness or injury requiring treatment, hospitalization, or surgery, family medical insurance must be used. Parents or guardians will be billed directly for any medical care given at the Student Health Center or the Mount Nittany Medical Center). I understand that the consent and authorization herein granted are only valid during this program.
  
- ✓ I give permission for my daughter/son (considered a minor) to reside in University housing with a Current Penn State student.
  
- ✓ If my daughter/son will have a different departure plan than originally intended and indicated below, I will communicate it personally to the program coordinator, Dr. Nuket Acar (814-863-5938) as soon as possible.

**ARRIVAL AND TRANSPORTATION**

ANTICIPATED ARRIVAL DATE AND TIME: \_\_\_\_\_

ANTICIPATED MODE OF TRANSPORTATION: \_\_\_\_\_

DEPARTURE PLAN: \_\_\_\_\_

PARENT/GUARDIAN NAME (please print): \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Please check this box if you **don’t** want your daughter/son to be photographed.

**Please send your registration and payment on or before March 11, 2011 to:**

**STAY OVER PROGRAM  
c/o Dr. Nuket Acar  
Veterinary and Biomedical Sciences Department  
115 Henning Building  
University Park, PA 16802**

## A typical Stay Over Program will look like this:

### Thursday March 17, 2011:

#### 4:00 pm:

- **CHECK-IN:** 101 Agricultural Sciences and Industries Building (ASI)
- Meet your host, take pictures

#### 5-6 pm:

- Mix and mingle with the Stay Over Committee members, faculty, Pre-Vet and Biomedical Sciences club Members over pizza in the lobby of 101 ASI;
- Official welcoming by Dr. Marcos Fernandez, Associate Dean of Undergraduate Studies, College of Agricultural Sciences;
- Special Presentation by the Stay Over Committee

#### 8 pm:

- Organized activities with your hosts and spend a night in your host's dorm room;

### Friday March 18, 2011:

#### Morning:

- Attend various classes with your host
- Stop at Creamery, Bookstore, Nittany Lion Shrine, or Libraries

#### Evening:

- Group dinner at Pollock Commons;
- Speakers during the dinner to cover ANSCI, VBSC, IID and TOX majors; and Honors College;
- Questions and Answers session

#### After 8 pm:

- Organized evening activities

### Saturday March 19, 2011:

**Morning (8-11:00am): CHECK OUT** from Stay Over Program

### Saturday March 19, 2011 (Optional):

**Northeastern Regional Pre-Vet Symposium starts at 8:00am and ends at 4:00pm.**

**For more information, please contact Angelica Aldaba at [ama5585@psu.edu](mailto:ama5585@psu.edu) or log onto the following website: <http://agsci.psu.edu/clubs/pre-vet/symposium/symposium%20flyer.pdf/view>**

**For stay over program make sure to bring a sleeping bag, pillow, flip-flops for the shower, your personal items. Try not to pack too heavily since it is only 3 days.**