



CENTER FOR MATHEMATICS AND SCIENCE EDUCATION
Mountain Biodiversity
June 27 – July 1, 2011

First Name: _____ Last Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ School Phone: _____

Preferred E-mail Address: _____

Name of School: _____

School System: _____

School Address: _____

City: _____ State: _____ Zip: _____

Number of years taught: _____ Current Position: _____

Statement of Commitment

Teacher: I agree to attend all 5 days of the summer institute unless I am prevented by unavoidable circumstances.

Teacher's Signature

Date

If you are interested in the graduate credits, please contact Sandy Ballinger at (828) 227-3317 before completing this registration form

Amount enclosed: _____ **\$30 Registration Fee** _____ **\$85 - 2 hours graduate credit (optional)**
 _____ **\$75 - \$125 residence fee –depending on accommodations (optional)**
 (see <http://www.wcu.edu/hbs/Facilities.htm> for details)

Registrations Accepted on a first come, first serve basis until the course is filled.
Return this signed application form with your registration fee (or a signed statement from your administrator saying the money is forthcoming) to the address below.

Make checks payable to WCU Center for Mathematics and Science Education