

JULIAN KRINSKY MODEL UN SUMMER PROGRAM

2008 APPLICATION

To speed the application process, apply online at www.jkcp.com

Student Information

| | | | | |
|----------------------------------|----------|----------------|----------------------------|----------------------------|
| NAME | | SEX | <input type="checkbox"/> M | <input type="checkbox"/> F |
| ADDRESS | | | | |
| CITY/STATE/ZIP | | | COUNTRY | |
| HOME PHONE | HOME FAX | E-MAIL ADDRESS | | |
| DATE OF BIRTH (MM/DD/YY) | | AGE AT PROGRAM | | |
| ROOMMATE REQUEST (if applicable) | | | | |

Family Information

| | |
|---------------------|---------------------|
| PARENT 1 NAME | PARENT 2 NAME |
| PARENT 1 WORK PHONE | PARENT 2 WORK PHONE |
| PARENT 1 CELL | PARENT 2 CELL |
| PARENT 1 E-MAIL * | PARENT 2 E-MAIL * |

*Please provide at least one parent e-mail. Your child's application confirmation will be sent to that address.

In case of emergency, if parent cannot be reached, please contact:

| | | |
|-----------------|--------------|----------|
| NAME | RELATIONSHIP | |
| PHONE: HOME () | WORK () | CELL () |

How did you hear about Julian Krinsky Camps & Programs?

| <input type="checkbox"/> PREVIOUSLY ATTENDED JKCP | WHICH CAMP OR PROGRAM? | NUMBER OF YEARS |
|--|------------------------|-----------------|
| <input type="checkbox"/> FROM ANOTHER STUDENT | NAME | |
| <input type="checkbox"/> ADVERTISEMENT/ARTICLE | PUBLICATION | |
| <input type="checkbox"/> POSTCARD MAILING | POSTCARD CODE | |
| <input type="checkbox"/> CAMP FAIR | NAME | |
| <input type="checkbox"/> CAMP REFERRAL AGENCY | NAME | |
| <input type="checkbox"/> SCHOOL/GUIDANCE COUNSELOR | NAME | |
| <input type="checkbox"/> INTERNET SEARCH | WEBSITE | |
| <input type="checkbox"/> OTHER | | |

School Information

| | | | | | |
|--|---------------|----------------------------|-----------------------------|-----------------------------|-----------------------------|
| SCHOOL CURRENTLY ATTENDING | CURRENT GRADE | <input type="checkbox"/> 9 | <input type="checkbox"/> 10 | <input type="checkbox"/> 11 | <input type="checkbox"/> 12 |
| SCHOOL ADDRESS | | | | | |
| CITY/STATE/ZIP | | | COUNTRY | | |
| SCHOOL PHONE | | | | | |
| NAME OF GUIDANCE COUNSELOR | | | PHONE | | |
| TYPE OF SCHOOL <input type="checkbox"/> PRIVATE <input type="checkbox"/> PUBLIC <input type="checkbox"/> PAROCHIAL <input type="checkbox"/> HOME | | | | | |

School Reference Information

Please list the name, address and telephone number of a teacher or guidance counselor you would like to use as a reference. We will contact them directly.

| | |
|---------------------------------------|---------|
| NAME OF GUIDANCE COUNSELOR OR TEACHER | |
| POSITION HELD | PHONE |
| NAME OF SCHOOL | |
| SCHOOL ADDRESS | |
| CITY/STATE/ZIP | COUNTRY |
| E-MAIL | |

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Extracurricular Activities

List your extracurricular activities (sports, arts, community service, after school classes, workshops, participation in school newspaper, yearbook, special skills):

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

What skills and strengths will you bring to Model UN? What do you have to offer? _____

Do you currently participate in a Model UN program at your school? Yes No

What do you hope to accomplish in the course of the Model UN program? What do you hope to gain from this experience? _____

Program Dates and Tuition

June 29 – July 26 \$5,300

- There is an additional \$165 charge per weekend for trips and excursions (excluding meals).
- Nonrefundable application fee, payable at time of application: \$100.

Optional Services

- Shuttle to/from Philadelphia Airport \$30 one way/\$50 round trip
- Overseas Student Surcharge \$200 per student (includes local airport pickup and drop off, laundry and linen services)

The following additional application requirements must be mailed as soon as possible to:

Julian Krinsky Model UN, 610 S. Henderson Rd., King of Prussia, PA 19406

It is best to send all materials in one package to our King of Prussia address in order to expedite the application and decision process. Your application is only considered complete once all parts have been received and your deposit has been paid in full.

- **Letter of Recommendation:** The Letter of Recommendation is enclosed as well as downloadable at www.jkcp.com.
- **Letter of Reference:** To be completed by an individual outside of the academic community who can attest to the applicant's character (i.e. an employer, clergyman, coach, scout or service group leader). The Letter of Reference should be on letterhead and include a description of your relationship to the individual as well as an evaluation of your efforts.
- **Copy of Academic Transcript**

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An \$800 deposit plus a \$100 nonrefundable application fee must accompany this application. Your application will not be considered complete until your deposit has been received. If you are not accepted into the program, your deposit will be returned.

Refund/Cancellation Policy: Notification of withdrawal must be made in writing to the program. Refunds will be made as follows:

| Withdrawal date: | By May 1 | May 2nd and later |
|--------------------------|-------------------|--|
| Amount of refund: | All but \$300/wk. | No refund without cancellation insurance |

We recommend cancellation insurance to protect against unforeseen circumstances, sudden illness or injury to you or a family member, or a change in travel plans. JKCP offers cancellation insurance that provides a refund of all but \$300 per week. The price of the insurance is 5% of the total tuition fee and must be paid at the time of application. There will be no refund of tuition after May 1 if cancellation insurance was not paid in full at the time of application. Even if cancellation insurance is paid for, there will be no refund for a student who is asked to leave the program for the use or possession of tobacco, drugs, alcohol and/or weapons or whose conduct is detrimental to the program. These decisions are at the sole discretion of JKCP. Please read our policy online at www.jkcp.com/getinfo/cancellation.php.

Please complete entire application, cancellation form (if applicable) and send payment with check(s) payable to:

Julian Krinsky Camps & Programs • 610 S. Henderson Rd. • King of Prussia, PA 19406

Indicate student name and program on check.

Payment of Fees for Overseas Students:

All funds should be transferred to Wachovia Bank, Philadelphia, PA 19101.

To request wiring instructions, please email julian@jkcp.com.

If you have not received your email confirmation within four days, please contact our office at **866-879-5527 or 610-265-9401**.

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LETTER OF RECOMMENDATION

Please print this form and give it to the person who you have chosen to provide a Letter of Recommendation for you.

CANDIDATE NAME _____

The candidate named above is applying to the Julian Krinsky Model UN Summer Program located at the University of Pennsylvania. Acceptance to this program requires that candidates show evidence of intellectual curiosity and be socially and emotionally mature enough to handle the choices and opportunities they might encounter in a challenging program. On the basis of these criteria, we welcome your evaluation of this candidate's ability to successfully participate in our program. This recommendation will be used exclusively in the evaluation process for Model UN and will be kept strictly confidential from both candidates and parents.

| | Excellent | Above Average | Average | Below Average |
|---------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Academic Achievement | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Willingness to Learn | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Maturity and Responsibility | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Motivation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Respect for Rules and Community | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Leadership Ability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Has the student ever been involved in any disciplinary action that you are aware of? Yes No

If yes, please explain: _____

We welcome any insights you can share regarding this candidate or suggestions on how we can enhance this candidate's experience with us. _____

Overall Recommendation

I recommend this candidate without reservation.

I recommend this candidate with reservation. Please explain: _____

I feel that this candidate is unsuited for the program at this time.

NAME _____

TITLE/POSITION HELD _____

PHONE _____

SIGNATURE _____

DATE _____

Please fill out all information above and mail this form to
MODEL UN, Julian Krinsky Camps and Programs
610 S. Henderson Road, King of Prussia, PA 19406
or fax to 610.265.3678