

#### 3D Printing with CAD/CAM Boot Camp STUDENT APPLICATION One teacher recommendation form is required to be accepted into the program. Please ensure you answer the questions to the best of your ability. Deadline is <u>Wednesday, October 18, 2023</u>

# PERSONAL DATA

MAKE SURE THIS APPLICATION FORM IS LEGIBLE. PLEASE COMPLETE IN PEN.

### Student Information

Last Name	First Name	Middle Name
Address & City/Town		Postal Code
Home Phone	Cell Phone	Grade
School	Date of Birth (m/d/y)	
Email Address		

### Parent/Guardian Information (if applicable)

Mother/Guardian Name	Work Phone
Address & City/Town (if different)	Postal Code
Mother/Guardian Email Address	
Father/Guardian Name	Work Phone
Address & City/Town (if different)	Postal Code
Father/Guardian Email Address	

## Health Information

Doctor Name	Phone	
Health Care No.	,	
Important Medical Information		
Name of 1 <sup>st</sup> Emergency Contact		
Day Phone	Evening Phone	
Name of 2 <sup>nd</sup> Emergency Contact		
Day Phone	Evening Phone	

#### Information Relevant to the 3D Printing Skills Boot Camps

1. Do you have experience in any of the following? (Check off all that apply)

- □ 2D CAD
- □ 3D CAD
- □ 3D printing
- □ Model processing
- □ Freeform surface modeling
- 2. Have you completed or currently taking the following high school courses?
- $\Box$  Computer Science 20
- □ Computer Science 30

Drafting 10Drafting 20Drafting 30

4. In a paragraph explain why you believe you are a strong candidate to participate in the SIEC 3D Printing Skills Boot Camp.

Voluntary Self-Declaration:		
Person with a Disability	Visible Minority	Treaty/Registered (Status) Indian
Metis Person	Non-Status Indian	Inuit Person
Please indicate the name of the second secon	ne teacher who is filling out the re-	commendation form on your behalf:
	Please submit this application	to:
Ν	Megan Unrau, SIEC Program Coord Email to	dinator
	megan@saskatooniec.ca	