**Science Oxford STEM Summer Experience Application Form 2021**

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| --- | --- |
| Name |  |
| Date of birth |  |
| Gender (how you identify) |  |
| Permanent address |  |
| Telephone number |  |
| Email address\* |  |
| School/college currently attending |  |
| School/college year |  |

\*only use your school email if you will be checking it out of school time

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| --- |
| Do you have any accessibility issues or disabilities that we may need to take into consideration for the online experience? |
|  |

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| --- |
| Do you have access to a computer or a device capable of using Zoom or Microsoft Teams? (answering no, will not affect your application) |
|  |

**Please provide details of a parent or guardian we can contact in the case of an emergency**

|  |  |
| --- | --- |
| Name of Parent or Guardian |  |
| Parent or guardian email address |  |
| Contact Phone number |  |

**STEM Summer Experience Online Safety Agreement**

The event will be held online via Zoom or MS Teams.

The following guidelines will be followed for safeguarding purposes.

STEM employers and Science Oxford staff will:

* have 2 DBS-checked Science Oxford staff present on each call.
* ensure there will be no 1:1 engagement.
* ensure no STEM employer will contact students outside the prearranged meetings using these online tools.
* use professional language, dress and behaviour throughout the call.
* ensure that their background is appropriate.
* disable the private chat and screen share function for students.
* be the last to leave the call.

Students will:

* use appropriate language and behaviour throughout the call.
* ensure that they are dressed appropriately and that their background is neutral or that their camera will be switched off.
* ensure that an appropriate adult is nearby.
* not attempt to contact STEM employer volunteers via this platform.
* not record any of the material from the STEM Summer Experience.

We expect reasonable behaviour from participants at all times. We reserve the right to remove participants from the week if these requirements are not met.

**Parent or Guardian Agreement**

**I………………………………(Parent name) hereby consent to………………………….(student name) taking part in the STEM Summer Experience scheme run by Science Oxford, and if successful in their application, I am aware that they will be required to abide by the terms and conditions set out in the online safety agreement above.**

**In signing this agreement, I am also aware that Science Oxford is the facilitator of the virtual visits and not the visit host. I understand that all reasonable risk and safeguarding checks have been made with the organisations taking part, as per Science Oxford’s policy.**

**Name…………………………. Contact telephone number……………….**

**Signed………………………… Date……………………**

**Project Idea**

As part of the two-week experience you will be asked to undertake a research project. One of the first steps is to think about which area of focus you would like to investigate and why.

In which subject area would you like to research?

Choose up to three in order of preference **(1,2,3).**

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| --- | --- | --- |
| Astronomy/Astrophysics/Space |  |  |
| Biological Sciences |  |  |
| Chemistry |  |  |
| Construction/Civil Engineering |  |  |
| Engineering |  |  |
| Environmental Sciences/Climate |  |  |
| IT/Software Design/Computing |  |  |
| Manufacturing/Product Design |  |  |
| Renewable Energy |  |  |
| Other (please specify below) |  |  |

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| Based on your answers above why have you chosen those three specific areas? |
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| Is there a specific scientific question that has always interested you? |
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| What do you enjoy doing out of school? |
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| What you would like to do when you leave school? |
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| What you would like to gain from the STEM Summer Experience? |
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| How does the current Covid-19 situation make you feel about Science? |
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| How did you hear about this opportunity? (Please circle) |
| Teacher, website, other student, social media, other ……………………….. |

Please list the qualifications you already have

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| --- | --- | --- |
| subject | type of qualification | grade |
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Please list the subjects that you are currently studying and predicted grades

|  |  |  |
| --- | --- | --- |
| subject | type of qualification | grade |
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**This section should be completed by a teacher**

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| --- | --- |
| Name of teacher |  |
| Position within school |  |
| Telephone number |  |
| Email |  |

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| Personal reference for the student |
|  |
| Is the student in receipt of the pupil premium? |
|  |

Please return completed application forms in **Word** format to [**STEMcareers@scienceoxford.com**](mailto:STEMcareers@scienceoxford.com)Thank you

For more information about our Secondary School Programme, please subscribe to our newsletter**.** [**https://scienceoxford.com/newsletter-signup/**](https://scienceoxford.com/newsletter-signup/)