

**PRE-APPLICATION CHECKLIST**

**To the Student:** Before submitting an e-Studies application, honestly evaluate each of the following statements. A parent, teacher, or guidance counselor may be able to assist you.

**Academic Skills**

- I usually finish tasks/assignments ahead of time.
- I rarely need to be reminded about due dates or assignments.
- I usually follow a teacher's **written** directions well.
- I consider myself a good reader; I understand most of what I read without help.
- I ask questions and/or look for information when I don't understand something.
- I am comfortable with the idea of not being able to get an immediate answer to a question.
- I don't need to be in the same room as the teacher or other students to learn.
- I have **5-7 hours** per week to devote to an e-Studies course.

**Technology Skills**

- I am comfortable using a Web browser to navigate the Internet.
- I am able to identify navigation options and important information on various Web sites.
- I am comfortable using my computer's word-processing program.
- I know how to save and access files to and from various locations (e.g. folders, drives, desktop) on my computer.
- I am comfortable sending and receiving e-mail.
- I check my e-mail account regularly.
- I know how to send and view e-mail attachments.
- I know how to download files from the Internet.
- I am able and willing to access help and support resources for technical issues.

**Resources & Support**

- I have regular access, either at home or at school, to a reliable computer with Internet access.
- I have reviewed the technology requirements and recommendations, available at [www.tip.duke.edu/e-studies](http://www.tip.duke.edu/e-studies), and the computer I will be using meets these requirements.
- I have an adult (parent, guardian, teacher, etc.) who can assist me with non-Blackboard-related computer issues at home or at school.

**How did you do?**

If most or all of these statements describe you, you're ready to apply.

**Questions?**  
**e-Studies@tip.duke.edu** or  
**001-919-668-9100**

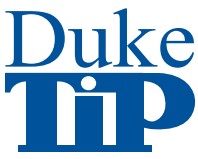
**APPLICATION CHECKLIST**

**Did you remember to...**

- Include your Duke TIP ID? This 10-digit number can be located at the top of mailing labels from Duke TIP. If you don't have a Duke TIP ID, leave the spaces blank and be sure to include copies of your qualifying SAT or ACT scores.
- Include a reliable e-mail address? Duke TIP expects that e-Studies students and parents will check their e-mail accounts frequently. Be sure to adjust your security settings so that you can receive e-mails from addresses that end in "tip.duke.edu."
- Verify that you meet the admissions criteria for the course(s) you've selected?
- Include your personal statements (parts I and II), either typed or neatly handwritten in blue or black ink and limited to the spaces provided on pages 2 and 3 of the application?
- Read carefully the policies, expectations, and code of conduct found on page 4 of the application?
- Sign and have your parent/guardian sign the completed application under the "permission to participate" statement on page 4 of the application?
- Include your nonrefundable \$25.00 application fee? (Please do **not** send course fees with the application.)
- Mail your application as soon as possible, but no later than **November 13, 2009**?

**You may also need to...**

- Include documentation of successful completion of prerequisites if applicable.
- Include a piece or excerpt of original fiction (500 - 1,000 words) if you are applying for Short Fiction Workshop II.
- Include a copy of your qualifying SAT or ACT scores if you did not participate in Duke TIP's 7th Grade Talent Search.



Duke University TIP ID# (if available) \_\_\_\_\_

Name \_\_\_\_\_  
First Middle Last

Home Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Country of Citizenship \_\_\_\_\_ If USA, please indicate county of residence. \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_

Sex  Male  Female

**Ethnic Description (optional)**

Black/African American  White/Caucasian  Hispanic/Latino  American Indian/Native American  Asian/Pacific Islander  Other

Date of Birth (MM/DD/YYYY) \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_

Were you a participant in the Duke TIP 7th Grade Talent Search?  Yes  No

(If "No," you must include copies of qualifying SAT or ACT scores.)

Primary Contact  Mother  Father  Guardian

Name  Dr.  Mr.  Mrs.  Ms. \_\_\_\_\_

Live with?  Yes  No Daytime Phone (\_\_\_\_) \_\_\_\_\_

Secondary Contact  Mother  Father  Guardian

Name  Dr.  Mr.  Mrs.  Ms. \_\_\_\_\_

Live with?  Yes  No Daytime Phone (\_\_\_\_) \_\_\_\_\_

Who is the Custodial Parent?  Both Parents  Mother  Father  Other (Specify) \_\_\_\_\_

E-mail will be the primary means of communication between Duke TIP staff and e-Studies students and parents. Please provide reliable e-mail addresses at which we may contact you. These e-mail addresses will only be used by Duke University TIP and will not be sold or distributed to any outside parties.

**Please be sure to write legibly; distinguish between 1 (number) and l (letter), and between 0 (number) and O (letter).**

Parent E-mail Address \_\_\_\_\_

Student E-Mail Address \_\_\_\_\_

Grade (as of Fall 2009)  8th  9th  10th  11th  12th

School Name \_\_\_\_\_

Type of School  Public  Private  Boarding  Home School

<b>Office Use Only:</b>		
Date Rcvd: _____	App ID#: _____	Placed: _____
Ck/M/V #: _____	Amount: _____	FA: _____





## POLICIES

The Duke University Talent Identification Program is committed to high academic and social standards for all students participating in our educational programs. Students should be absolutely certain that they are willing to abide by Duke TIP standards of conduct and to meet or exceed all expectations before applying to the program.

### General Expectations

Students are expected to take full advantage of the program's intellectual and social learning experiences by applying themselves to the best of their abilities and participating fully in course activities.

Students are expected to demonstrate honesty, truthfulness, and fairness, and to conduct themselves in a manner that is respectful of other students and Duke TIP staff.

Students are expected to approach Duke TIP's e-Studies Program with a strong sense of personal responsibility for their own learning and conduct, as well as a willingness to take responsibility for the consequences of their actions.

### e-Studies Program Code of Conduct

- Students will not engage in academic or social dishonesty, including, but not limited to, plagiarism. Student work submitted for evaluation in an e-Studies course will be the unassisted work of the student, unless the instructor has allowed group collaboration for the assignment and/or has given express permission for a student to consult specific sources.

- Students will not share their login information or allow non-registered users to access or participate in activities on e-Studies course Web sites.

- Students will access Duke TIP's e-Studies course Web sites only for lawful purposes.

- Students will respect the privacy of other users, and will respect the integrity of the computer systems and other users' data.

- Students will comply with the Blackboard acceptable use policy, which requires that Blackboard course e-mail lists (if enabled in the course) are to be used for course-related e-mailing only.

- Students will respect the copyright protection of computer software, video and audio files, and print materials. Students will not make use of, or encourage the use of, illegally copied or downloaded materials.

- Students will not engage in "hacking" or other behavior that may disrupt, obstruct, or otherwise hinder the instructional activities of the course and/or cause damage to other participants' computer systems.

- Students will not harass, abuse, or insult other students, instructors, or Duke TIP staff members on the course Web site, or in any communication related to the course. Such harassment or abuse may include, but is not limited to:

- Communication that degrades or demeans an individual or group based on that individual or group's ethnicity, sex, race, religion, or sexual orientation,

- Unwanted sexual advances, and/or

- Intimidation or threats of any kind.

- Students will not post links or make reference to Web sites or other materials that are offensive or inappropriate in nature.

## SIGNATURES

I give permission for \_\_\_\_\_ (student's full name) to participate in Duke TIP's e-Studies Program. I have read and am aware of the score requirements and prerequisites (if any) for each course, and I understand that qualification for admission to the program does not assure my child a place in any of the courses. I have read the policies, expectations, and code of conduct for Duke TIP's e-Studies Program, and I understand that my child may, at the discretion of Duke TIP, be dismissed from the program for violation of these policies. In such an event, I understand that Duke TIP will not refund program or application fees. I have also reviewed the technical requirements and recommendations (hardware and software) for the e-Studies Program and acknowledge that my child has regular access to a computer that meets the specified requirements. I am aware that instructional activities and communication for the e-Studies Program will occur via the Internet (including e-mail). I acknowledge that my child has access to an e-mail account, and I authorize Duke TIP staff to send program- and course-related material to that e-mail account.

Signature of Parent/Guardian \_\_\_\_\_

Date \_\_\_\_\_

Signature of Student \_\_\_\_\_

Date \_\_\_\_\_

Mail or fax all completed application and financial aid materials, including your nonrefundable application fee (\$25.00) to:

Duke University TIP  
e-Studies  
1121 W. Main Street  
Durham, NC 27701  
001-919-681-4182

Applications must be  
postmarked by  
**November 13, 2009**



**Directions:** Please complete **Part A** before giving this form to an advisor, guidance counselor, principal, teacher, or other school representative. This form is incomplete without an official transcript or grade report and an official record of standardized test scores (if available). **Application Deadline: November 13, 2009**

**PART A: TO BE COMPLETED BY STUDENT**

**Student Name** \_\_\_\_\_  
*First Middle Last*

**School Name** \_\_\_\_\_

**School Address** \_\_\_\_\_  
*Number and Street*

\_\_\_\_\_  
*City or Town State/Province Country Zip/Postal Code*

**School Phone** \_\_\_\_\_

**Optional:** *The Family Educational Rights and Privacy Act (FERPA) of 1974 gives students (persons admitted and enrolled in the program) the right to inspect letters of recommendation written in support of applications for admission. The law also permits students to waive the right if they choose, although such a waiver cannot be a condition of admission. If you wish to waive your right to examine this recommendation form, please sign the waiver below:*

**Participant's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**PART B: TO BE COMPLETED BY SCHOOL OFFICIAL**

**Directions:**

1. We ask that a guidance counselor, principal, teacher, or other school official complete this form.
2. The form must be returned, along with a copy of the student's transcript, to the student in a sealed envelope. The school official who completes the form should sign his or her name across the seal.
3. The transcript should include the most recent grades and a report of standardized test scores.
4. Home-school students must submit curriculum documentation. Someone who knows the home-schooled student in a social/academic environment, other than a relative, should complete this form.
5. Contact the Duke TIP office at (919) 668-9100 or e-Studies@tip.duke.edu for assistance.

**PART B: TO BE COMPLETED BY SCHOOL OFFICIAL**

**School Official's Name** \_\_\_\_\_  
*First M.I. Last*

**E-Mail Address** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**How long have you known the student and in what capacity?** \_\_\_\_\_

**Student's Class Rank** \_\_\_\_\_ out of \_\_\_\_\_ students.  **Weighted**  **Unweighted**

**GPA (Weighted)** \_\_\_\_\_ on a \_\_\_\_\_ scale **GPA (Unweighted)** \_\_\_\_\_ on a \_\_\_\_\_ scale

**Student's most recent standardized test scores (please provide all available scores)**

**SAT** Date \_\_\_\_\_ V/CR \_\_\_\_\_ M \_\_\_\_\_ W \_\_\_\_\_

**PSAT** Date \_\_\_\_\_ V/CR \_\_\_\_\_ M \_\_\_\_\_ W \_\_\_\_\_

**ACT** Date \_\_\_\_\_ E \_\_\_\_\_ M \_\_\_\_\_ R \_\_\_\_\_ SR \_\_\_\_\_ Composite \_\_\_\_\_

**Other (Specify):** Test \_\_\_\_\_ Date \_\_\_\_\_ Score(s) \_\_\_\_\_

**GIFTED RATING SCALE**

**Directions:** Using the 6-category scale next to each item, rate your impression of the student relative to other students of the same age. Please complete all items. Rate each item individually as a student’s skills can vary across items; a student may excel on some but not all items.

*Compared to other students of the same age, rate the level at which this student:*

	Well Below Average	Below Average	Average	Above Average	Well Above Average	Excellent
	1	2	3	4	5	6

**INTELLECTUAL ABILITY**

Learns information quickly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Understands abstract ideas and concepts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prefers complex and challenging tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates intellectual curiosity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expresses thoughts clearly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays depth of academic knowledge	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**MOTIVATIONAL CHARACTERISTICS**

Enjoys academic tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays tenacity in pursuing challenging tasks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is not easily discouraged	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is well-prepared for class	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Shows pride in academic work	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates good study and organizational skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PERSONAL CHARACTERISTICS**

Follows classroom rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Respects authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gets along well with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Exhibits self-confidence	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Displays trustworthiness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintains a positive attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Handles stress effectively	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Maintains self-control; thinks before acting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Expresses emotions appropriately	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepts feedback and criticism	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**1. Please indicate the level at which the student is currently working in the subject area(s) with which you are familiar:**

Below grade level   
  At grade level   
  1 grade level above   
  2+ grades above

**2. Please indicate the student’s likelihood of succeeding in an academically rigorous program:**

Very unlikely   
  Unlikely   
  Somewhat Likely   
  Likely   
  Very Likely

**3. In one or two sentences, please describe the student’s social and emotional maturity:**

**Rater Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**IMPORTANT:**  
Complete and return this form only if you wish to pay the nonrefundable application fee (\$25.00) by credit card.

**STUDENT INFORMATION**

DukeTIP ID # \_\_\_\_\_

Student's Name: \_\_\_\_\_  
(First) (MI) (Last)

**PAYMENT INFORMATION**

The nonrefundable application fee (\$25.00) will be charged at the time of application.



Cardholder's Name (As it appears on card): \_\_\_\_\_  
(please print)

Cardholder's Billing Address: \_\_\_\_\_  
(please include ZIP code)  
\_\_\_\_\_

Cardholder's Telephone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

I declare that the information on this form is correct and complete. I authorize a payment of \$25.00 to be charged to my credit card.

Cardholder's Signature: \_\_\_\_\_ Date: \_\_\_\_ / \_\_\_\_ / 2009

Type of Credit Card: (check one)    

Credit Card Account Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Expiration Date (MM/YY): \_\_\_\_ / \_\_\_\_ Charge Amount: \$25.00