

# LIFT CAMP

(Look Into your Future Today)

July 18-20, 2011

## TENTATIVE L.I.F.T. CAMP SCHEDULE

### Monday, July 18

8-9 a.m.	Residence Hall Check-in and Registration
9:30 a.m.	Opening Meeting (Review schedule, guidelines and expectations)
10:30 a.m.	Admissions Presentation and College Tour
Noon	Lunch
1 p.m.	Hospital Visit-IU Goshen Health System
5 p.m.	Dinner and Recreation Time
7:30 p.m.	Health Careers Workshop, Nursing Presentation and/ or Health Career Research Project

### Tuesday, July 19

8-9 a.m.	Breakfast
9:30 a.m.	Elkhart General Hospital CPR Training
Noon	Lunch
1 p.m.	Majoring in the areas of Math & Science
5 p.m.	Dinner and Recreation Time
7 p.m.	Research Project
9:00pm	College Cabin and GC Student Real Talk Session

### Wednesday, July 20

8-9 a.m.	Breakfast
9:30 a.m.	What is next? ACT/SAT, Study habits for math & science, college admissions....
10:30 a.m.	Research Project
Noon	Lunch
1:00 p.m.	Community Service Project at Goshen Boys & Girls Clubs
6 p.m.	Dinner, Research Presentations, and Awards Program (Families are invited)
7:30 p.m.	Check out of Residence Hall

## WHAT IS LIFT?

Students explore practical applications of math and science concepts to real life problems while learning about health careers. In addition to their classroom experiences, students visit both Elkhart General Hospital and the IU Goshen Health System. The students will even get CPR training, allowing them to gain exposure to health occupations. All materials and activities are free of charge for students who are selected to participate in the program.

## WHERE WILL YOU LIVE?

You will be living on campus in the residence halls. A roommate will be assigned to you. You will also have a Resident Assistant living in the residence hall with you.

## WHAT DOES IT COST TO ATTEND?

LIFT camp is free to all qualified students and instructional materials are provided by the science department at Goshen College.

## WHAT SHOULD YOU BRING?

- Casual clothes/comfortable walking shoes/ jacket or sweater
- Toiletries (shampoo, soap, deodorant, toothbrush, toothpaste, etc.)
- Cell phone

## HOW DO YOU APPLY?

Please mail application and personal statement by **May 30** to:

Goshen College Admissions  
1700 S. Main St.  
Goshen, IN, 46526

or fax application to **(574) 535-7609**

or fill out an application online at: [mao.goshen.edu](http://mao.goshen.edu)

You will be notified of your acceptance by June 2, 2011.

An orientation for all students will be held on Tuesday, **June 14** for all selected participants.

## QUESTIONS?

Contact Odelet Nance or Liliana Ballge.

**Odelet Nance**, Ph.D.

Director of Multicultural Affairs  
(574) 535-7546  
[onance@goshen.edu](mailto:onance@goshen.edu)

**Liliana Ballge**

Bilingual Enrollment Counselor  
(574) 535-7062  
[lilianab@goshen.edu](mailto:lilianab@goshen.edu)

# 2011 Look Into Your Future Today (LIFT) Summer Camp **APPLICATION FORM**

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## STUDENT INFORMATION:

Name: \_\_\_\_\_  
(Last) (First)

Date of birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Sex:  Female  Male

Address: \_\_\_\_\_  
(Street address or postal box) (City, State, ZIP/Postal Code)

Email address: \_\_\_\_\_ Home/Cell phone \_\_\_\_\_

High School Name: \_\_\_\_\_ Year: \_\_\_\_\_ Grade-Point Average: \_\_\_\_\_

High School Address: \_\_\_\_\_ City, State, ZIP/Postal Code: \_\_\_\_\_

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## STUDENT RACIAL/ ETHNICITY (CHECK ALL THAT APPLY):

- African American/Black  Asian  White (non-Hispanic)  
 American Indian/Alaskan Native  Native Hawaiian/Pacific Islander  Multiracial
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## CONTACT PERSONS AND TELEPHONE NUMBERS:

### In case of emergency:

Parent(s)/Guardian(s): \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
(Home phone) (Cell/Work phone)

Address: \_\_\_\_\_ Email address: \_\_\_\_\_  
(Street address or postal box) (City, State, ZIP/Postal Code)

Emergency contact person: \_\_\_\_\_ Emergency contact phone:(\_\_\_\_\_) \_\_\_\_\_

Relation to student: \_\_\_\_\_

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## Additional questions:

Do you receive free/ reduced lunch at school?  Yes  No

Are you a 21st Century Scholar?  Yes  No

Did either one of your parent(s) graduate from college?  Yes  No

Will you be providing transportation for your child?  Yes  No

T-shirt size:  XS  S  M  L  XL  XXL



**GOSHEN COLLEGE OVERNIGHT/ TRANSPORTATION PERMISSION FORM:**

**Student Information:**

Name: \_\_\_\_\_ Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_  
*(Last) (First)*

Address: \_\_\_\_\_  
*(Street address or postal box) (City, State, ZIP/Postal Code)*

**In case of emergency:**

Parent(s)/Guardian(s): \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ (\_\_\_\_)  
*(Home phone) (Cell/Work phone)*

Address: \_\_\_\_\_  
*(Street address or postal box) (City, State, ZIP/Postal Code)*

I give my permission for my son or daughter (named above) to stay overnight on the Goshen College campus in order to partake in the Look Into Your Future Today (L.I.F.T.) program. The program includes overnight stays from July 18th through July 20th. I hereby release, indemnify and hold harmless Goshen College, its trustees, employees, students, agents and assigns from any and all liability, damage, claim of any nature whatsoever, including claims for negligence, arising out of or in any way related to my son or daughter's participation in this visit to Goshen College. I understand that this visit is undertaken by my son or daughter on a completely voluntary basis and that he/she is responsible for his/her actions while on campus. I agree that despite precautions, accidents, injuries, and/or loss or damage of personal property may occur, and I assume all risks related to participation in this visit.

In case of emergency and if I cannot be reached, I, the undersigned parent or guardian of the above-named student, hereby authorize a representative of Goshen College to consent to any medical treatment or care deemed advisable.

I give permission for my son or daughter to travel to and from Elkhart General Hospital as part of this program in a Goshen College vehicle. I agree that despite precautions, accidents, injuries may occur, and I assume all risks related to transportation.

\_\_\_\_\_  
*Parent/ Guardian Signature*

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