



**Dr. Sharon Roberts**  
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## STUDENT APPLICATION FOR ROBOTICS

<b>Student name:</b>	
<b>Name of current school:</b>	<b>Name of current math teacher:</b>
<b>Grade:</b>	<b>Name of current science teacher:</b>
<b>Student: Please describe why you are interested in the Robotics Program. If needed, use the back.</b>	
<b>Are you currently enrolled in:</b> <b>Pre-AP or advanced math:</b> ___YES ___NO <b>Pre-AP science:</b> ___YES ___NO	<b>Date:</b> _____ <b>Student Signature:</b> _____

<b>For Robotics Coach Use Only:</b>  <b>Is the student identified GT?</b> ___ YES ___ NO  <b>Is the student currently enrolled in at least one Pre-AP course:</b> ___ YES ___ NO  <b>Does the math and/or science teacher recommend this student to participate in the Robotics Program for GT/Pre-AP?</b>  ___ YES ___ NO  <b>Other information used to select the student to participate in the Robotics Program:</b>
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