



UNIVERSITY AT ALBANY

State University of New York

Eureka! Program Application

Eureka! Summer 2025, July 7, 2025- August 1, 2025

Application due: **April 1, 2025**

**FOR OFFICE USE ONLY**

Date App. Received: \_\_\_\_\_ 12

Interview: \_\_\_\_\_ Y \_\_\_\_\_ N

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Notes: \_\_\_\_\_

To submit application or to request an extension email: [kmucci@gcr.girls-inc.org](mailto:kmucci@gcr.girls-inc.org)

*Please print in ink or type*

Student Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name [1]: \_\_\_\_\_

Relationship to applicant: \_\_\_\_\_

Parent/Guardian [1] Phone Number: \_\_\_\_\_ Circle: Cell / Home

Parent/Guardian [1] E-mail: \_\_\_\_\_

Parent/Guardian Name [2]: \_\_\_\_\_

Relationship to Applicant: \_\_\_\_\_

Parent/Guardian [2] Phone number: \_\_\_\_\_ Circle: cell/home

Student Phone Number: \_\_\_\_\_ Circle: Cell / Home

Student Email \_\_\_\_\_

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**This Portion of the Application is for the Student:**

Name of your School: \_\_\_\_\_

What grade will you be in (September 2025)? \_\_\_\_\_

HS Graduation year \_\_\_\_\_ Age: \_\_\_\_\_ Birth Date: \_\_\_\_\_

T-shirt size (adult) \_\_\_\_\_

**TO BE CONTINUED BY STUDENT**

In an effort to get to know you a little bit better, we have written a few short answer questions below to be answered by the person who knows you best – you! This is an opportunity for *you* to share information about yourself in your own words. Relax, be honest, and do the best that you can. Please answer each question in a MINIMUM of three sentences. You can add a page to the document if you need more space.

*1. Why do you want to be a part of the Eureka! program?*

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2. *What are your academic interests?*

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3. *Do you enjoy STEM? What do you like/dislike about it?*

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4. *What other activities are you committed to and when/for how long do they meet?*

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5. *Do you have any ideas about future careers and goals?*

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CONTINUED...

6. *How would others describe you?*

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7. *How would you describe yourself?*

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8. *Do you know how to swim? Do you enjoy swimming?*

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9. *Do you play any sports? Do you enjoy playing sports? What are your favorites and why?*

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10. *Is there anything else you would like to share about yourself?*

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***Please Complete this final question with your parent/guardian. Eureka! is in session from July 7th – August 1st all day from about 8:30am to 4:30pm. Do you foresee any potential conflicts with your attendance for the whole 4 weeks every summer?***

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1. What are your personal hopes and goals for your child's education?

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2. Why do you want your child to attend this program?

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3. Do you feel as though you will be able to commit your child to attend the summer camp and internship components? Explain.

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4. Does your daughter have an IEP/Accommodations through the school she attends? If so, please elaborate so we can create the best environment for your child to succeed.

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5. Is there anything else you would like to share about your child?

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6. Do you foresee any issues that would inhibit you/your child's school year commitment to this program until your child graduates high school? This includes attending programming during the school year.

Yes     No    Please explain "Yes" and "No" answers:

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**TO BE FILLED OUT BY PARENT/GUARDIAN**

*The following information is confidential and will be used for grant writing purposes and statistical use. Your name will never appear next to the information.*

**Mother/Father/Stepmother/Stepfather/Guardian/Other** \_\_\_\_\_:

Circle highest level completed: Grades 1-8    Grades 9, 10, 11, 12    Assoc. Degree, BA or BS

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Part Time \_\_\_ Full Time \_\_\_ Number of years employed \_\_\_\_\_

**Mother/Father/Stepmother/Stepfather/Guardian/Other** \_\_\_\_\_:

Circle highest level completed: Grades 1-8    Grades 9, 10, 11, 12    Assoc. Degree, BA or BS

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

Part Time \_\_\_ Full Time \_\_\_ Number of years employed \_\_\_\_\_

**With whom does the student live?**

Both parents \_\_\_ Father only \_\_\_ Mother only \_\_\_ Guardians \_\_\_ Mother/Stepfather \_\_\_  
Father/Stepmother \_\_\_

Other \_\_\_ If Other, Please list Relationship \_\_\_\_\_

**School lunch eligibility:** Please Circle    Free    Reduced    Paid

**Please Indicate which is most accurate of your circumstances:**

Income Level:	# of people in Household	Girl's Ethnic Background:
Under \$10,000	1	Asian/Pacific American
\$10,000-\$15,000	2	Black/African American
\$15,000-\$20,000	3	Latino/Hispanic American
\$20,000-\$25,000	4	Indian/Native American
\$25,000- \$30,000	5	White/European American
\$30,000-\$50,000	6	Multiracial/Multiple Heritage
\$50,000 and Above	7	Other: _____

***If my daughter is accepted into the Eureka!® Program, I will encourage her to participate fully in all aspects of this 5 year program, including orientations, the four week summer sessions, and at minimum a monthly activity throughout the school year. I will ensure that all the proper forms are completed and returned on time. I will support her by attending required meetings and one or more of the following (field trips, commencement celebrations, year round follow-up session).***

Parent/Guardian Name (print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

***If selected as a member of the Eureka!® Program, I agree to participate fully in all aspects of this 5 year program, including orientations, the four week summer sessions, and at minimum a monthly activity throughout the school year. I understand that my attendance is important in order for me to remain in and fully benefit from the program.***

Student Name (print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Recommendations:**

Please provide the name and telephone number of an adult (other than a family member) whom we can call for a recommendation. This could be a teacher, a counselor, a coach, or a mentor.

**OR**

Attach a letter(s) of recommendation from the individual(s). Please be sure their contact information is included below.

Name: \_\_\_\_\_  
\_\_\_\_\_

Number:

Name: \_\_\_\_\_  
\_\_\_\_\_

Number:

Applications can be sent to Girls Inc. at:

**Mail Application to:**  
Girls Inc.  
962 Albany Street  
Schenectady, NY 12307  
Attention: Eureka!

**Email Application to:** [kmucci@gcr.girls-inc.org](mailto:kmucci@gcr.girls-inc.org)  
Subject: Eureka! Application

**This program is contingent upon funding.**

**This application will not be processed if incomplete.**