

Oklahoma School of Science  
and Mathematics  
Enid Regional Center



Autry Technology Center

**AUTRY**  
TECHNOLOGY CENTER

School Year 2010-2011  
Application for Admission

*Application Deadline: March 31<sup>st</sup>, 2010*

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February 1<sup>st</sup>, 2010

**Dear Student:**

**The faculty and steering committee of the Enid Regional Center for the Oklahoma School of Science and Mathematics are pleased that you are considering making application for the 2010-2011 school year.**

**The Regional Center is designed to provide a rigorous one year program of academic instruction for students talented in science and mathematics. The classes are held on the Autry Technology Center campus in two exceptionally well-equipped classroom / lab areas with computer and experimentation workstations. Students attend the Regional Center on a half-day schedule while remaining in their local high school for some academics, electives and extra-curricular activities.**

**Please review this application booklet carefully. It is designed to supply you with the basic information about our application process, a brief overview of our history and educational philosophy, and course descriptions. The actual application materials are located at the end of the booklet.**

**All application materials must be received by March 31<sup>st</sup>, 2010. Applicants will be notified by April 16<sup>th</sup>, 2010 if they have been selected as semifinalists. These students will be invited to Autry for personal interviews on Tuesday, April 27<sup>th</sup>, 2010. The finalists will receive written notification from the Selection Committee by May 4<sup>th</sup>, 2010.**

**We look forward to receiving your application. If you have questions or concerns, please do not hesitate to call Autry Technology Center.**

**Sincerely,**

**Edna Manning, President  
Oklahoma School of Science & Mathematics**

# **REGIONAL CENTER FOR THE OKLAHOMA SCHOOL OF SCIENCE AND MATHEMATICS**

## **History/Mission**

The Regional Center for the Oklahoma School of Science and Mathematics at Autry Technology Center was created through legislative action by House Bill 1510 during the 1999 session. House Bill 1510 provides for an educational outreach program for the Oklahoma School of Science and Mathematics by developing regional sites for rural students who are gifted in science and mathematics. The program will be governed by the Oklahoma School of Science and Mathematics.

The Regional Center for the Oklahoma School of Science and Mathematics at Enid shall be for the following purposes:

- provide advanced educational opportunities for high school students gifted in math and science who attend the Autry Technology Center sending schools.
- allow participating students to maintain their local high school affiliation and extra-curricular participation while living at home.
- utilize the existing Autry Technology Center transportation system and facilities.

## **Philosophy**

The goal is to provide a one-year program of added educational opportunities and challenges for gifted students regardless of their income or cultural diversity. The curriculum is designed to provide a complimentary and accelerated program to expand students' current and previous local high school courses in math and science. Advanced studies will be targeted to encourage individual differences, competencies, and expectations. In addition to the course work at the Regional Center of Science and Mathematics, the student will be able to maintain the local high school affiliation and extracurricular participation. A cooperative effort of the local high school, Autry and OSSM makes this program possible. Students will need the support of family, their local high school, and the Regional Center of Science and Mathematics to promote good study and work habits to assure success and course completion.

## **Setting**

The setting of the Regional Center for the Oklahoma School of Science and Mathematics will be the campus at Enid. Transportation will be the same system currently being utilized for Autry students. Students will attend semester courses at the Regional Center in a morning or afternoon session. Morning sessions will begin at 8:15 a.m. and end at 11:00 a.m. Afternoon sessions will begin at 12:30 p.m. and end at 3:15 p.m. All classes will be Monday through Friday on the same school calendar as Autry.

## **Cost**

There is no tuition for students to attend the Regional Center for the Oklahoma School of Science and Mathematics. Students are responsible for costs associated with school supplies and incidental expenses related to their course work. Transportation to and from the local high school will be provided by Autry for in-district students only. Students selected from outside of the Autry Technology Center sending district are responsible for making their own transportation arrangements with their home sending school.

## **Program Management**

The Regional Center at Enid for the Oklahoma School of Science and Mathematics is managed by a system established in House Bill 1510 (1999). An advisory council will assist the Oklahoma School of Science and Mathematics in governing the program. The Advisory Council is responsible for:

- establishing eligibility criteria for student participation
- finalizing approval of curriculum and academic standards
- assisting in the determination of advanced science and math courses
- assisting in the recruitment and hiring of faculty

Advisory Council membership shall consist of the following representatives:

1. A superintendent of a participating local school district or designee within the Autry district
2. The Superintendent of Autry or a designee; and
3. The Outreach Coordinator for the Oklahoma School of Science and Mathematics or a designee.

## **The Academic Program**

Students selected to attend the Regional Center for the Oklahoma School of Science and Mathematics at Enid have achieved an outstanding record of scholarship within their local high schools. The faculty and the Advisory Committee are committed to academic excellence which will enhance previous knowledge as well as prepare students for future studies. Students completing courses at the Regional Center will have experienced an accelerated curriculum, based upon high academic principles that demonstrate both academic discipline and academic integrity.

All students attending the Regional Center will participate in a one-year scholastic program of excellence with students who share similar interests. It is the nurturing of this educational community, while maintaining the local high school affiliation that is paramount to the Regional Center's success.

## **Curriculum**

- OSSM has two professors (one calculus and one physics)
- Students are required to take the assigned calculus and the assigned physics course each semester.
- All courses are on a semester basis at the collegiate level requiring rigorous academics and a minimum of one hour homework per evening.
- Courses will be: Calculus I, General Physics, Calculus II, Mechanics

## **Minimum Academic Requirements**

Students will be expected to maintain an overall B average for course work at the Regional Center. If a student's grade falls below a C average, the parents will be notified at that time by a progress report indicating areas of deficiency and improvements needed. Failure to improve academically may result in a meeting with the OSSM administration and Autry Technology Center administration for the purpose of determining the student's continuation in the program. The OSSM instructors, in conjunction with the Autry Technology Center administration, will coordinate communications with the local high school representative and parents or guardians to support the academic improvement of the student. Students who do not meet the Regional Center's educational and/or behavioral expectations may be asked to return to their home school.

## **Attendance Policy**

One of the most attractive things about the Regional Center is that it allows students to continue participating in extracurricular activities at their home schools. However, frequent absences can be detrimental to academic performance. To try and minimize the effect of extracurricular activities on the student's performance, these guidelines have been established.

1. Activity absences should be limited to no more than one in any week and no more than five per semester. If the student misses more than one day in a week, the student will be asked to schedule additional time with the instructors.
2. The student is responsible for obtaining all material covered during an absence. Assignments due on the day of an absence must be turned in early or on the day the student returns to class. Please try to avoid missing lab days because they are very hard to reschedule.
3. The student must notify his/her professors at least one day prior to the activity. If the student does not, the absence will not be excused. This time is needed so the instructors can prepare their class schedules and let the student know what he/she will miss while he/she is away.
4. The student will follow the Autry attendance policy concerning absences due to illness and family emergency. Please consult Autry's student handbook for the complete details of this policy.

## **Application**

Admission to the Regional Center of the Oklahoma School of Science and Mathematics is a highly competitive process initiated by written application. An admission committee will review all data and select the semifinalists. Members of this committee are the OSSM Regional Center instructors and the Outreach Coordinator of OSSM or a designee.

Student applications are reviewed while protecting the anonymity of the applicants. Once the applications have been reviewed, a select number of applicants are classified as semifinalists. Letters are sent to all applicants advising them whether or not they have been selected to participate in the interview portion of the admissions process.

## **Interview**

A Selection Committee made up of individuals from each in-district sending school will be responsible for the interview process and selecting the finalists. Individuals selected to interview will appear before the committee for approximately twenty to thirty minutes. Applicants will also be given a scholastic aptitude test. Students need a scientific calculator for this segment. Letters will be sent to all students advising them of the outcome of the selection process within two weeks of the final selection.

Students are assessed for:

- Scientific interest and aptitude
- Motivation
- Self-discipline
- Personal maturity
- Overall potential as an OSSM Regional Center student.

## **Who Can Apply**

As this is a one-year program, preference will be given to Seniors, but Juniors may also apply. Students that reside within reasonable transportation distance of Autry Technology Center may apply. Should space be limited, preference will be given to students from the (10) sending school districts that are served by Autry Technology Center and provide its tax base. The ten (10) sending schools are:

- |                      |                                     |
|----------------------|-------------------------------------|
| 1. Chisholm          | 6. Garber                           |
| 2. Cimarron          | 7. Kremlin-Hillsdale                |
| 3. Covington-Douglas | 8. Pioneer-Pleasant Vale            |
| 4. Drummond          | 9. Pond Creek -Hunter (Hunter Only) |
| 5. Enid              | 10. Waukomis                        |

## **ADMISSION PROCESS**

### **2010-2011 School Year**

Applications Accepted:	Feb. 1 to March 31, 2010
Notification of Semifinalists:	By April 16, 2010
Semifinalist Interviews:	April 27, 2010
Notification of Finalists:	By May 4, 2010

#### **Application Availability**

(Available on or after February 1<sup>st</sup>, 2010)

To receive a printed application, either visit Autry Technology Center in person or contact your school counselor. Applications are also available for download in electronic format at <http://ossm.autrytech.com/general/ossmapp2010.pdf>. To receive one via US mail, contact us by phone at (580) 242-2750 or via e-mail @ [jeaton@autrytech.com](mailto:jeaton@autrytech.com)

# OSSM Application for Admission

*All application materials must be returned to high school counselor by Wednesday, March 31<sup>st</sup>, 2010*

## **SECTION I. To be completed by student. (Please print or type)**

Applicant Name (First, Middle, Last):	School Now Attending:
Mailing Address:	Current Grade Level:
City and Zip Code:	Preferred Class Time: (Morning or Afternoon)
Parent/Guardian Name:	Home Phone Number:
Parent/Guardian Address: (If different from above):	Student Email Address: (Optional)

**Write a short essay below on “Why I would be a good candidate for the Oklahoma School of Science and Mathematics Enid Regional Center.” (100 words or less)**

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**SECTION II. To be completed by student and parent(s).**

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The information contained herein is true and accurate. If the applicant is accepted for admission to the Regional Center for Oklahoma School of Science and Mathematics, we agree to adhere to the rules and regulations of OSSM and Autry Tech. We also agree to permit the information in this application and in other records used to apply to OSSM to be made available on a confidential basis to the student's home school, other educational institutions, and for other purposes pursuant to the Family Educational Rights and Privacy Act of 1974, as amended, and applicable regulations.

**RELEASE OF CONFIDENTIAL INFORMATION**

We, the parents of the applicant, hereby consent to the release of this application to the OSSM review committee. We understand that the review committee is designed to ensure fair representation of students from across the Autry Tech district. The review committee is comprised of individuals appointed by sending school districts for the specific purpose to review all applications of prospective students so as to recommend students best qualified to attend the school. We understand further that this release to the review committee will not allow any other person not otherwise privileged to review this application to have access to it.

We understand that a decision not to sign this release will not affect consideration by the school of our child's application. By our signatures below, we indicate that we have read this release, understand it, and agree to the terms contained in it.

**AUTHORIZATION FOR RELEASE OF EDUCATION RECORDS**

In accordance with federal regulations regarding the privacy rights of parents and students under the Family Educational Rights and Privacy Act of 1974, the undersigned hereby consent to the release of all education records about the below named applicant to the Oklahoma School of Science and Mathematics, including recommendation and such other information as may be requested.

**PARENT RELEASE/APPROVAL**

I do hereby grant permission for my son/daughter to be examined and treated by qualified medical personnel in an emergency situation.

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

\_\_\_\_\_  
Date

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

**If you DO NOT want your student's information, including photographs and new releases to be published, please send written notice.**

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**Section III. To be completed by the principal or counselor.**

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

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The student named above is applying for admission to the Enid Regional Center for the Oklahoma School of Science and Mathematics

1. Standard Rank in Class \_\_\_\_\_
2. STANDARDIZED TEST RECORDS: Please provide this information even if provided on the transcript.  
ACT: Test Date: \_\_\_\_\_  
English \_\_\_\_\_ Math \_\_\_\_\_ Reading \_\_\_\_\_ Science \_\_\_\_\_ Composite \_\_\_\_\_
3. If ACT has not been taken, list the name of a Standardized Test administered within the past two years. Results from this test should accompany the official transcript. \_\_\_\_\_
4. When did you or will you take the ACT? \_\_\_\_\_

I certify that the information given above is correct.

\_\_\_\_\_

Date

\_\_\_\_\_

Signature of School Official

**\*The student's official High School Transcript must be included with this form.**

**\*All information should be turned in to the local high school counselor by Friday, March 31<sup>st</sup>, 2010.**

**Oklahoma School of Science & Mathematics Regional Center  
Autry Technology Center  
1201 West Willow  
Enid, Oklahoma 73703  
Attn: OSSM Selection Committee**

## APPLICATION CHECKLIST

- Copy of official transcript requested from high school.
- Copy of ACT scores requested from high school.
- Application Section I completed.
- Application Section II completed.
- Application Section III completed.
- Recommendations requested:
  - \_\_\_\_\_ Mathematics teacher
  - \_\_\_\_\_ Science teacher
  - \_\_\_\_\_ Principal or Counselor
- Copy of Spring 2010 class schedule.

**Application Deadline Friday, March 31<sup>st</sup>, 2010**

Completed application and support materials should be returned to local high school counselor by Friday, March 31<sup>st</sup>, 2010.

# Principal or Counselor Recommendation

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

This student is applying for admission to the Enid Regional Center for Oklahoma School of Science and Mathematics. In order to consider the student carefully, we ask the professional educators who have worked with him/her to evaluate his/her strengths and weaknesses, both as a student and as a person. Your candid assessment of this student's potential for success at OSSM is extremely valuable to the admissions process.

This recommendation should be returned to the **high school counselor** by **Wednesday, March 31<sup>st</sup>, 2010**. Call Jeremy Eaton at 580-242-2750 ext. 121 with any questions. Thank you for your assistance.

To the best of your ability, please check all that apply.

- Foster Home     
  Poor social skills     
  Learning deficit/disability     
  IEP  
 Poor self-image     
  Single parent family     
  Poor communication skills     
  Lack of cultural enrichment

Please specify learning deficits or disabilities: \_\_\_\_\_

Based on your knowledge, check below how you rate the applicant in each area:

	Outstanding	Above Average	Average	Needs Improvement	No Basis for Judgment
Academic Achievement					
Relation of Achievement to Ability					
Math Skills					
Reading Skills					
Science Skills					
Class Participation					
Work Habits					
Cooperates with School Staff					
Cultural Awareness					
Attendance/punctuality record					
Relates well with peers					
Motivated to succeed academically					
Personal Responsibility					
Attitude and Appropriate Behavior					

Additional Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Length of time you have known this student:** \_\_\_\_\_

Guidance Counselor Signature \_\_\_\_\_ Date \_\_\_\_\_

► Student: Please read and sign the following statement before giving this form to your teacher. Your teacher will return the form to your school counselor for inclusion in your application packet.

**“I hereby waive all rights to see this recommendation form when completed.”**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Science Teacher Recommendation

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

This student is applying for admission to the Enid Regional Center for Oklahoma School of Science and Mathematics. In order to consider the student carefully, we ask the professional educators who have worked with him/her to evaluate his/her strengths and weaknesses, both as a student and as a person. Your candid assessment of this student's potential for success at OSSM is extremely valuable to the admissions process.

This recommendation should be returned to the **high school counselor** by **Wednesday, March 31<sup>st</sup>, 2010**. Call Jeremy Eaton at 580-242-2750 ext. 121 with any questions. Thank you for your assistance.

Based on your knowledge, check below how you rate the applicant in each area:

	<b>Outstanding</b>	<b>Above Average</b>	<b>Average</b>	<b>Needs Improvement</b>	<b>No Basis for Judgment</b>
Expresses interest in academic endeavors					
Academic Achievement					
Relation of Achievement to Ability					
Writing Skills					
Reading Skills					
Is dependable and reliable					
Class Participation					
Work Habits					
Cooperates with School Staff					
Attendance/punctuality record					
Relates well with peers					
Motivated to succeed academically					
Personal Responsibility					
Attitude and Appropriate Behavior					
Will be successful in college endeavors					

Additional Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Length of time you have known this student:** \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

► Student: Please read and sign the following statement before giving this form to your teacher. Your teacher will return the form to your school counselor for inclusion in your application packet.

**"I hereby waive all rights to see this recommendation form when completed."**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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## Math Teacher Recommendation

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

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This student is applying for admission to the Enid Regional Center for Oklahoma School of Science and Mathematics. In order to consider the student carefully, we ask the professional educators who have worked with him/her to evaluate his/her strengths and weaknesses, both as a student and as a person. Your candid assessment of this student's potential for success at OSSM is extremely valuable to the admissions process.

This recommendation should be returned to the **high school counselor** by **Wednesday, March 31<sup>st</sup>, 2010**. Call Jeremy Eaton at 580-242-2750 ext. 121 with any questions. Thank you for your assistance.

Based on your knowledge, check below how you rate the applicant in each area:

	<b>Outstanding</b>	<b>Above Average</b>	<b>Average</b>	<b>Needs Improvement</b>	<b>No Basis for Judgment</b>
Expresses interest in academic endeavors					
Academic Achievement					
Relation of Achievement to Ability					
Math Skills					
Writing Skills					
Is dependable and reliable					
Class Participation					
Work Habits					
Cooperates with School Staff					
Attendance/punctuality record					
Relates well with peers					
Motivated to succeed academically					
Personal Responsibility					
Attitude and Appropriate Behavior					
Will be successful in college endeavors					

Additional  
Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Length of time you have known this student:** \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

► Student: Please read and sign the following statement before giving this form to your teacher. Your teacher will return the form to your school counselor for inclusion in your application packet.

**“I hereby waive all rights to see this recommendation form when completed.”**

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_