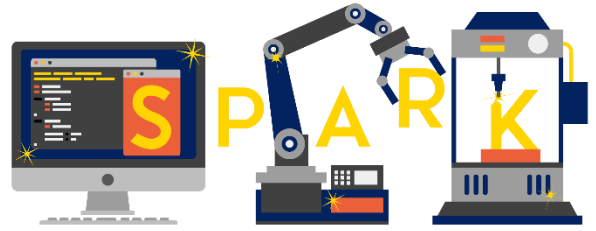


**Parent/Guardian Participation Consent Agreement  
Health Services Treatment Agreement  
Student Conduct Agreement (intent to sign)**



University of Connecticut, School of Engineering  
**SPARK PROGRAM**

Sunday, July 7<sup>th</sup> through Saturday, July 13<sup>th</sup>, 2019 or  
Sunday, July 14<sup>th</sup> through Saturday, July 20<sup>th</sup>, 2019 or  
Sunday, July 21<sup>st</sup> through Saturday, July 27<sup>th</sup>, 2019 or  
Sunday, July 28<sup>th</sup> through Saturday, August 3<sup>th</sup>, 2019

**DO NOT send payment with your application.**

**Please type or print clearly**

**Personal Data**

Applicant's First and Last Name: Arianna Pedraza  
Address: 188 High Street  
City: Baltic State: CT Zip Code: 06330  
Home Telephone Number: ( 860 ) 705-5004 Email Address: krysel1010@gmail.com

**Parent/Guardian Participation Consent and Health Services Treatment Agreement**

I hereby give permission for my son/daughter (named above) to participate in the **SPARK Program**. I am aware that the University of Connecticut does not provide insurance coverage for any summer program students. I agree that insurance coverage is my personal responsibility. The University of Connecticut will not be held responsible for accidents or injuries sustained by students. In the case of illness, accident, or injury, I grant permission for the student to be treated at University Health Services.

Print Parent/Guardian First and Last Name: Krystal Bensley  
Signature of Parent/Guardian: Krystal Bensley Date 06/17/2019

If the student will be 18 years of age on or before the start of the program they must also sign below:

Print Student's First and Last Name: Arianna Pedraza  
Signature of Student: Arianna Pedraza Date 06/17/2019

**Students are given a housing conduct contract** as part of the online application. You and your parent/guardian will be required to sign this agreement indicating that you will comply with the rules of the University of Connecticut as a **SPARK** participant.

Signing below signifies you understand and agree to this requirement:

Print Parent/Guardian First and Last Name: Krystal Bensley  
Signature of Parent/Guardian: Krystal Bensley Date 06/17/2019

Print Student's First and Last Name: Arianna Pedraza  
Signature of Student: Arianna Pedraza Date 06/17/2019

**The online application must be completed by June 17th, 2019.**

**These deadlines are FIRM. Incomplete applications will not be considered.**