

Application form for “High School Math Days”, June 14-17, 2005.

Name: _____

Phone Number: _____ Email: _____

High School and Year in school: _____

Math courses taken in High School: _____

Mailing Address: _____

Name of the Math teacher who can best describe your ability and enthusiasm for math:

• **All applicants.** Please attach a brief (i.e. one or two paragraph) personal statement which describes why you are interested in participating in this program.

• Please send all materials to

Scott Ahlgren
Department of Mathematics
University of Illinois
1409 W. Green St.
Urbana, IL 61801
ahlgren@math.uiuc.edu