March 14, 2019

Aloha,

Honolulu Community College is once again pleased to announce its upcoming Summer Engineering Academy. Space will be limited, so please apply as soon as possible. Only 60 students will be selected for the Engineering Academy. Program details are as follows:

June 10, 2019 to July 19, 2019 from 8:00 AM - 12:00 PM, Monday - Friday
*No meeting on July 4, 2019 - Independence Day
Application Deadline: May 13, 2019

Summer Engineering Academy
Summer Engineering Academy, or SEA, is an intensive summer program that offers students the opportunity to learn, think, and solve problems like an engineer. Students will apply their knowledge of math and science to practical projects. Students will see concepts they learned in the classroom come alive. Through lab work, group projects, lectures, and assignments, students will learn how engineers approach real-world problems. Students will meet other students with similar interests, collaborate on testing theories, and find solutions to engineering problems.

Autonomous cars are the new trend, but do you think you can program one to run autonomously? We are currently planning to explore the engineering fields related to Autonomous Cars, Robotics (Electrical and Mechanical Engineering), and Architecture.

As students complete SEA projects on materials, structures, chemical processes, circuit design, computer programming, robotics, and other topics, they will gain insights into which engineering fields best match their
abilities and interests. These modules will be two weeks in length and 4 hours long each day. Students will rotate through each module.

Students will also take a college success class to prepare them for entry into the University System. This class is designed to orient students to the college setting. Students will be able to identify campus resources, demonstrate knowledge of college procedures, discuss definition of success and evaluate their important life roles. Students will attend this course every Wednesday from 8 to 9 am. Parents will attend a financial aid workshop and also receive scholarship information. Date to be announced.

Prerequisites are completion of geometry, completion of physics, or chemistry or biology and basic computer skills.

Questions regarding the program please call or email:
Norman Takeya (808) 844-2376
ntakeya@hawaii.edu
Dear Summer Engineering Academy Applicant:

This checklist is provided to assure that all of your forms are completed, signed and submitted in a timely manner.

WHAT: 2019 Summer Engineering Academy

WHEN: June 10 – July 19, 2019; 8:00 AM – 12:00 PM

WHERE: Honolulu Community College, Building 2, 6th Floor

DEADLINE: Mail or hand deliver forms with registration fee no later than May 13, 2019 (sooner is better!)

REGISTRATION FEE: $200
Please make checks payable Honolulu Community College.

MAIL TO
ADDRESS: Honolulu Community College
PCATT – ATTN Summer Engineering Academy
874 Dillingham Blvd.
Honolulu, HI 96817

OR HAND DELIVER: Honolulu Community College
Building 2, Room 507
PCATT – ATTN Summer Engineering Academy
874 Dillingham Blvd.
Honolulu, HI 96817

FORMS: All forms must be completed prior to attending classes
☐ Authorization for Student Participation Form
☐ Code of Conduct Form
☐ UH Risk and Release Form
☐ Photo and Video Release Form

QUESTIONS: Contact Norman Takeya via Email – ntakeya@hawaii.edu

Check List / 2019 Summer Engineering Academy Form
2019 Summer Engineering Academy 
Parent/Legal Guardian Authorization 
for Student Participation and General Information

Permission is requested for your child to participate in: the 2019 Summer Engineering Academy 
Location: Honolulu Community College, Building 2, 6th Floor 
Time and Dates: 8:00 AM to 12:00 PM, Monday – Friday; June 10 – July 19, 2019 
Participants are responsible for their own transportation to and from the event each day.

Parental Permission

Name of Student: _________________________________________________________________

Phone: ____________________________________________ (___ home ___ work ___ cell) 
E-mail Address: ________________________________________________________________

Emergency Contact: ____________________________________________________________ 
Relationship to student: __________________________________________________________

Phone: ____________________________________________ (___ home ___ work ___ cell) 
Phone: ____________________________________________ (___ home ___ work ___ cell) 

☐ My child has my permission to attend the 2019 Summer Engineering Academy.

Transportation:

As stated above, program organizers will not be responsible for the transportation of your child to and from campus each day. Once classes are done at 12:00 PM, your child will need to be picked up from our Honolulu Community College campus. Please let us know by checking the box below that you give your child permission to exit our campus to catch the Bus/Public Transportation or to Carpool.

☐ My child has my permission to leave the 2019 Summer Engineering Academy each day to catch the Bus/Public Transportation or to Carpool.

Medical Insurance Coverage:

☐ My child has medical coverage with: _____________________________________________ 
(Name of plan, e.g. HMSA, Kaiser, Military, etc…)

☐ My child is NOT covered by any medical insurance plan.
In the case of illness or injury to the above named student, I hereby consent to and authorize such treatment as deemed necessary, and agree to pay for such medical and dental costs if incurred.

__________________________
Print or Type Parent’s/Legal Guardian’s Name

__________________________
Parent’s/Legal Guardian’s Signature

__________________________
Date

Does your child have any allergies or medical conditions we need to be aware of (Please Explain/List Here)?

__________________________

__________________________
Good conduct is expected of all participants in Summer Engineering Academy. The 2019 Summer Engineering Academy will be held at Honolulu Community College from June 10 – July 19, 2019. The following rules will apply to all participants and all participants should read and understand each item before the start of classes.

1. I will behave in a professional manner at all times and reflect positively on myself, and my school.
2. I will respect the rights of others including belongings, personal space and privacy.
3. I will keep my instructor/advisor informed of my whereabouts at all times. During the scheduled classes and events, I will not leave the Honolulu Community College campus without informing and obtaining approval from my instructor/advisor.
4. I will be properly attired for all class sessions and activities, additionally for lab sessions I must wear appropriate footwear.
5. I will attend and be on time for all sessions and participate in all activities.
6. I will at all times respect all public and private property, including event facilities.
7. I will not smoke or chew tobacco or purchase, consume, or be under the influence of alcohol or illegal drugs at any time. I understand that violations are subject to disciplinary action and legal consequences.
8. I will only take medication prescribed by a licensed physician. If I am required to take medication, I will have a copy of the prescription with me at all times.
9. I will report any accidents, injuries, illnesses, or incidents to my instructor/advisor immediately.
10. I know that inappropriate or profane language is not acceptable.
11. My conduct shall be exemplary at all times.
12. I will leave my valuables at home including excess money.
13. If I disregard the rules I will be subject to disciplinary action and will be sent home immediately. My parent or guardian will be responsible for picking me up.
2019 Summer Engineering Academy
Code of Conduct

Are you able to commit fully to attend the Summer Engineering Academy, every day from start to finish, 8:00 AM to 12:00 PM, Monday – Friday, June 10 – July 19, 2019?

☐ Yes    ☐ No

1. In five (5) sentences or less, tell us why you want to attend the Summer Engineering Academy?

2. What technologies do you have experience with?

I have read the above Code of Conduct for the 2019 Summer Engineering Academy and agree to abide by these rules.

Print Name of Student ___________________________ Student Signature ___________________________ Date __________

Print Name of Parent/Guardian ___________________________ Parent/Guardian Signature ___________________________ Date __________
UNIVERSITY OF HAWAII

Name of Participant (Last Name, First Name, Middle Initial):

Program: 2019 Summer Engineering Academy Dates of Program: June 10 - July 19, 2019

ASSUMPTION OF RISK AND RELEASE

I/We, the undersigned, certify that the above named child is in good physical health and is able to participate in all activities of the above named program.

I/We also understand and acknowledge that there are inherent dangers and risks involved with participation in the above named program with the University of Hawai‘i, which include, but are not limited to: working with electronic devices, networking devices and computers.

I understand that I/We should be covered during the Dates of Program above by a private medical and liability policy; and I/We further understand that the University of Hawai‘i does not provide such insurance or otherwise indemnify individuals with respect to injuries or other liabilities arising out of participation in the above named program.

Therefore, in consideration of the above named child being permitted to participate in the above named program, I/We hereby agree to assume all risks and responsibilities surrounding his/her participation in the above named program. I/We have read and understand any and all written materials setting forth the requirements for participation in the above referenced activity, as well as those explained by the instructor(s), and I/We agree to strictly observe them. Further, I/We do for myself, my heirs, executors, and administrators hereby accept full responsibility for my child’s participation and agree to indemnify, release and discharge the University of Hawai‘i, State of Hawai‘i, its officers, employees, agents, and assigns from any and all claims or actions for property damage, personal injury, and/or death arising from such participation in the above named program or growing out of or caused by any acts or omissions of the above named child during their participation in above named program.

Signature of Parents/Guardian(s) Date

Print Name(s)

MEDICAL CONSENT FORM

I/We, the undersigned, consent to and authorize any medical professional and others working under their supervision to treat the above named child for any injury or illness arising from or related to my participation in the above named program.

I/We further agree to pay any and all medical expenses, costs and other charges and to release and discharge and hold harmless the University of Hawai‘i, State of Hawai‘i, its officers, employees, agents, and assigns from and against any liability or any claims or demands arising from or connected with such medical treatment or care.

IN CASE OF EMERGENCY:

First Person to Contact: Phone: 

Second Person to Contact: Phone: 

Physician to Contact: Phone: 

Signature of Parents/Guardian(s) Date

Print Name(s)
Photo and Video Release Form

I understand the photograph(s) or video or audio recording(s) taken of me on behalf of my participation in Summer Engineering Academy at Honolulu Community College (hereinafter called “the College”) may be used in connection with publicizing the College, its activities and academic programs to the general public.

I hereby irrevocably authorize the College to copy, exhibit, publish or distribute any and all such images and audio of me or wherein I appear, including composite or artistic forms and media, for purposes of publicizing the College’s programs or for any other lawful purpose. These images may be used in printed publications, multimedia presentations or on websites. I agree that I will make no monetary or other claim against the College for the use of the interview and/or photograph(s)/video.

In addition, I waive any right to inspect or approve the finished product, including written copy, wherein my likeness appears.

I hereby hold harmless and release the College from all claims, demands and causes of action which I, my heirs, representatives, executors, administrators or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this authorization.

Signature:  
I have read the above description and give my consent for the use as indicated above.

Printed Name: ____________________________________________
Signature: ____________________________________________ Date: __________________________

Email: ____________________________________________
Address: ____________________________________________
City, State, Zip: ____________________________________________
Telephone: ____________________________________________

If the person signing is under age 18, there should be consent by a parent or guardian, as follows:
I hereby certify that I am the parent or guardian of ________________________, the minor named above, and do hereby give my consent without reservations to the foregoing on behalf of this person.

Parental/Guardian Permissions (if applicable):

Printed Name: ____________________________________________
Signature: ____________________________________________ Date: __________________________
Email: ____________________________________________