

School Name _____ Phone No. _____

School Classification (circle one) 1A 2A 3A 4A 5A 6A Private School
(Please ensure that your classification is correct for this year.)

Total school enrollment grades 9 – 12 _____

School Address _____

Accompanying Teacher's Name _____

Accompanying Teacher's E-mail: _____

Check One:

YES, I plan on sponsoring a group from my school to participate in the ESU Mathematics Day, **October 23, 2019**.

NO, I cannot attend this year.

Number of buses you will use for transporting students to Math Day.

Number of other vehicles you will use for transporting students to Math Day.

List below the names of the students you wish to enter in each of the categories. **Applications must have student names to be accepted.** Any last minute changes must be reported at registration. **(Please print names legibly.)**

INDIVIDUAL CONTESTS

1. **One school can have at most three students in an individual contest.**
2. **Note the times of each event so no student is competing on a team and individual event at the same time.**

GEOMETRY INDIVIDUAL CONTEST – 10:00 A.M.

1. _____
2. _____
3. _____

ALGEBRA INDIVIDUAL CONTEST – 11:00 A.M.

1. _____
2. _____
3. _____

ON THE BACK OF THIS SHEET,
PLEASE LIST THE NAMES OF ALL
OTHER STUDENTS WHO WILL BE
ATTENDING MATHEMATICS DAY.

TEAM CONTESTS

1. **You may enter one team in each event. You do not have to enter all three team events.**
2. **A team must have exactly three members.**
3. **No student can be on more than one team.**

ALGEBRA TEAM CONTEST – 10:00 A.M.

1. _____
2. _____
3. _____

GEOMETRY TEAM CONTEST – 11:00 A.M.

1. _____
2. _____
3. _____

MATH SCRAMBLE – 12:00 P.M.

1. _____
2. _____
3. _____

Please print below in alphabetical order, the names of the other students who will attend Mathematics Day. Do not list the names of students already listed on the front side.

LAST NAME	FIRST	GRADE	LAST NAME	FIRST	GRADE
1. _____			11. _____		
2. _____			12. _____		
3. _____			13. _____		
4. _____			14. _____		
5. _____			15. _____		
6. _____			16. _____		
7. _____			17. _____		
8. _____			18. _____		
9. _____			19. _____		
10. _____			20. _____		

Note: There will be sessions with information on attending college. Current students and faculty will provide information about ESU and preparing for college in general. There will be door prizes for students who attend.

Mail to:

Dr. Connie S. Schrock
Department of Mathematics and Economics, Box 4027
Emporia State University
1 Kellogg Circle
Emporia, KS 66801

IF YOU DO NOT RECEIVE THE REPLY THAT YOUR APPLICATION ARRIVED AT ESU WITHIN 10 DAYS PLEASE CHECK TO MAKE SURE YOUR APPLICATION WAS SUBMITTED.

Due to a new ESU fax policy we prefer you to either mail or scan and email your completed application to us. This will ensure a faster response from us. Please email it to **both** of the following email addresses: trios@emporia.edu and hollenb@emporia.edu. If faxing is still best for you, you can send it to (620) 341-6055, it just might take a bit longer for us to process. **COMPLETED APPLICATIONS MUST BE RECEIVED BY OCTOBER 14, 2019.** I will confirm your school's registration by return mail. In the confirmation letter, you will find information relating to the parking of buses and cars. If you do not get a confirmation letter, please call RIGHT away to make sure your application was received.

I hope you will join me for my last year as the organizer for ESU Mathematics Day. Dr. Connie Schrock

Additional copies of this application can be found on our website:

<http://www.emporia.edu/mathsecon/outreach/mathday>