

# The Franklin Institute

222 N. 20th Street  
Philadelphia, PA 19103

# Application for PACTS Program

Off ice Numbers: 215-448-1282 or 215-448-1399  
FAX: 215-448-1219



Partnerships for Achieving Careers  
in Technology and Science

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Birth Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_ Age \_\_\_\_\_ Grade Level/Year \_\_\_\_\_

School Attending \_\_\_\_\_

Emergency Contact (Name) \_\_\_\_\_ Emergency Phone # \_\_\_\_\_

How did you learn about the PACTS Program? Which PACTS program are you interested in (Science Investigators/Science in the City/Robotics)?

\_\_\_\_\_

What are your career aspirations/goals?

\_\_\_\_\_

Are you involved in extracurricular activities in school? If so, please list the activities below.

\_\_\_\_\_

Are you interested in Science?  Yes  No

If yes, please list the area(s) of interest.

\_\_\_\_\_

Are you enrolled in a science course at school?  Yes  No

If yes, please list the name of the science course(s).

\_\_\_\_\_

On Average, what type of grades do you receive?

\_\_\_\_\_

Do you have interest in attending college?  Yes  No

If yes, what field would you like to study? (If you are unsure, you may list the fields that interest you)

\_\_\_\_\_

Additional Comments:

\_\_\_\_\_

\_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*I authorize my son/daughter to participate in the PACTS Program. I grant permission to him/her to take part in activities held at The Franklin Institute and field trips. I also understand that any behavioral misconduct from my son/daughter at The Franklin Institute and on field trips may result in dismissal from the PACTS Program. I grant permission for images captured of my child to be used by The Franklin Institute and its authorized partners to publish these images in promotional materials and publications, and wave any rights of compensation or ownership thereto.*