

Contact Person in Charge:		Site:	
Email:		Phone:	

**Name of Chaperone(s)**

Teacher (required):	
*Other (optional):	

\* Must have background check

**Complete names of students and staff applying for NACTEC**

This list is very important for making travel arrangements.

	Name	Grade	Gender	AK Student ID Number
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				

**Teacher Written Statement (please attach sheet):**

How you would like to see your students benefit from their NACTEC experience?

**Important Information:**

- Students must travel with a teacher. Students must have Covid-19 vaccinations.
- No more than 12 slots are available for your school, including students and teacher.
- It is possible that more slots may be offered to your school after final selection has been made.

**Information NACTEC needs BEFORE final selection of acceptance:**

- A **COMPLETED** Junior High Student Application for **EACH** student.

*NACTEC does not discriminate on the basis of race, color, national origin, sex, age or disability*