



## **Chaperone Application**

Name of Applicant: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_

- ☐ By marking this box, I confirm that I am committing to stay at the UC San Diego dormitories every night of the 7-week program. I understand that I will not be able to go home for any reason.
- ☐ By marking this box, I confirm that I am committing to support Prof. Graeve in organizing the Saturday field trips.
- ☐ By marking this box, I confirm that I am committing to be the main contact person between the ENLACE program staff and the parents of the high school students that will be assigned to my care.
- ☐ By marking this box, I confirm that I am 18 years of age or older.

**UC San Diego**