

32-HOUR SUMMER TECHNOLOGY BOOT CAMP

with *The Tech Queen*

Learn computer programming training plus
BONUS technology tools
PERSONALLY with *The Tech Queen*

WHO:

Youth ages 7-19

WHEN:

June 18-28, 2018 (Mon-Thurs)
10:00am-2:00pm

Students will learn to write HTML, video game creation, create websites using WordPress

Sponsored by:



In collaboration with:
Urban Chamber of Commerce
Information Technology roundtable



Duana R. Malone aka "The Tech Queen"

is an International Operations and Technology Expert, a Computer Programmer / Website Design Specialist with more than 30 years experience! She has developed websites for churches, government entities, national organizations, small businesses and large Corporate multi-million dollar to multi-billion dollar establishments around the world!

Voted 2018 "Technology Woman of the Year"



Duana R. Malone, aka "The Tech Queen"

Phone: 702-357-3334 ~ Email: drmalone@thetechqueen.com or download application from website:

<http://www.thetechqueen.com>

➡ APPLICATION DEADLINE: May 31, 2018 - 5PM



Assessment Survey

Student Information

STUDENT'S LAST NAME	STUDENT'S FIRST NAME	SEX (CIRCLE ONE) M F	GRADE LEVEL
---------------------	----------------------	------------------------------	-------------

1. Which of the following B.A.I.T.E.S. topics is MOST interesting to you? (*ie. Business, Administration, Information Technology, Entrepreneurship*) _____

2. Have you ever worked a job before? (*If "Yes", list location and briefly define your duties*)

3. What does INTEGRITY mean to you?

4. What are you **MOST** passionate about in Technology?

5. What will you be doing 10 years from now?

6. List three (3) skills that you possess which are your **STRONGEST** assets:

Use the **BACK** side of this sheet of paper to write a 150-200 word paragraph on **WHY** you should be selected for The Tech Queen's B.A.I.T.E.S. class. (**LIMITED SEATING**). You may also use the back of this sheet of paper as **EXTRA WRITING SPACE** if the lines above are not long enough.

Student Registration Form

Student Information

STUDENT'S LAST NAME	STUDENT'S FIRST NAME	SEX (CIRCLE ONE) M F	DATE OF BIRTH
DOES THE STUDENT HAVE ANY HEALTH CHALLENGES OR SPECIAL NEEDS THAT WE SHOULD BE AWARE OF? IF SO, PLEASE DESCRIBE.			GRADE LEVEL: (ie. 5 th , 4 th , 3 rd , etc.)
TALENTS, HOBBIES, INTERESTS		T-SHIRT SIZE (circle one) SMALL MEDIUM LARGE X-LARGE ←	

Parent/Guardian Information

LAST NAME		FIRST NAME			
ADDRESS			APT	CITY	STATE ZIP
DAY PHONE	EVENING PHONE		EMAIL ADDRESS		
IN CASE OF EMERGENCY, CONTACT (NAME, PHONE)			MOBILE PHONE NUMBER		

HOST CONDITIONS FOR SUCCESSFUL COMPLETION OF THE TECH QUEEN'S B.A.I.T.E.S. Curriculum

- I AGREE:** To be **ON TIME** and **PRESENT** (with notebook) at each class
- I AGREE:** To maintain self-discipline, and be a serious participant in each session, striving for personal growth
- I AGREE:** To look at and be willing to change failure-causing habits
- I AGREE:** To complete homework assignments
- I AGREE:** To pass a written or verbal exam in excellence *upon completion of training*



By signing below, you agree to the above terms and host conditions for Graduation.

Parent/Guardian Signature:

Student's Signature:

SIGNATURE

DATE

SIGNATURE

DATE

Training Location:

The training location will be disclosed
AFTER application has been
approved.

Phone: (702) 357-3334

To be completed by Office Administration for T-Shirts (if applicable)

OFFICE USE ONLY

PAYMENT INFO: (circle one) Check Money Order Cash

Name on Check:

Address on Check:

Check/Money Order # _____ Amt. _____ Date: _____

(There will be a \$35 processing fee for all RETURNED CHECKS)