



Thursday, January 19, 2017

Dear Families,

The Wisconsin Center for Academically Talented Youth (WCATY) is a statewide, year-round organization out of the University of Wisconsin- Madison dedicated to serving gifted and talented students by providing programs that support, motivate, and challenge. Our community strives to provide an engaging learning environment conducive to rapid academic growth and creation of meaningful connections.

Our five summer programs for 2<sup>nd</sup> through 12<sup>th</sup> grades offer a great academic and social experience for gifted and talented students who are ready for the next level of challenge. In each of the programs, the students choose one class to take for the duration of their camp experience. All class options can be found on the WCATY website at [www.wcaty.wisc.edu](http://www.wcaty.wisc.edu).



**Accelerated Learning Program: Grades 9-12**

University of Wisconsin-Madison, June 25-July 15, 2017  
Residential or commuter options



**Summer Transitional Enrichment Program: Grades 7-8**

University of Wisconsin-Madison, July 16-29, 2017  
Residential or commuter options



**Preparatory Academic Campus Experience: Grades 5-8**

University of Wisconsin-Madison, July 9-15, 2017  
Commuter option only



**Young Student Summer Program: Grades 4-6**

Wayland Academy, Beaver Dam, July 30-August 5, 2017  
Residential or commuter options



**Growing Early Minds: Grades 2-4**

University of Wisconsin-Madison, June 26-30, 2017 (9:00am-11:30am)  
Commuter option only

**Here are a couple things to know when applying for a WCATY program:**

- Financial Aid is available for families who qualify. You can find the DPI scholarship form on the back of this letter. If your family does not qualify for free/reduced lunch at school, you have the ability to send in a letter accompanied by the first page of your 2016 tax return to WCATY. Full or partial scholarships are awarded based upon need.
- If you are a returning student to WCATY, you need to submit the online application, pay the application fee, and submit your most recent grade report.
- If you are new to WCATY, you will need to submit the online application, pay the application fee, and submit the following documents: grade report, test scores, writing sample, and recommendation form. Your school coordinator or school guidance counselor will be able to help you gather those materials.
- Helpful application documents can be found on the "summer forms" page on the website. You can find registration guides, checklists, and other application forms.

If you have any questions throughout the process, please feel free to call the WCATY office at 608-890-3260 or email WCATY at [wcaty@education.wisc.edu](mailto:wcaty@education.wisc.edu). We look forward to having you as part of the WCATY community.

Respectfully,

*Marissa Greuel*  
Program Coordinator

*Katie Effertz*  
Program Coordinator

*Ola Skyba*  
WCATY Co-Director

[wcaty.wisc.edu](http://wcaty.wisc.edu)

225 N. Mills St. Suite 264 Teacher Education Bldg. | Madison, WI 53706  
Tel. (608) 890-3260 | [wcaty@education.wisc.edu](mailto:wcaty@education.wisc.edu)



Education Outreach  
and Partnerships  
SCHOOL OF EDUCATION  
UNIVERSITY OF WISCONSIN-MADISON



**INSTRUCTIONS TO THE STUDENT AND PARENT/GUARDIAN:**

Read instructions below. **DO NOT MAIL YOUR APPLICATION TO THE DPI/WEOP OFFICE.** This will only prolong the child from applying for the DPI Precollege Scholarship and it is based on a first-come first-serve through the college.

**INSTRUCTIONS FOR COLLEGE USE ONLY:**

Mail application to: *Enter name and address of college or institution.*

WCATY  
 Teacher Education Building, Suite 264  
 225 N. Mills St.  
 Madison, WI 53706

|                     |
|---------------------|
| College Applying To |
| Program Name        |

**You may receive a maximum of three DPI Precollege Scholarships per year.**

**STUDENT / PARENT INSTRUCTIONS:** Student must be eligible for Free or Reduced Price School Meals and, must have finished fifth grade, but not have graduated from high school to receive a DPI Precollege Scholarship.

Fill out **Section I—Student Information** completely. Parent/Guardian must sign in the space provided. Give this form to your principal, food services authorized representative at **your** school for completion of **Section II**. Once the signature is acquired through your middle or high school, mail it to the college that is coordinating for the precollege course your child is applying to attend.

When the college receives your application for the precollege course they will enter you into their program and mail the application to the DPI/WEOP personnel who will enter it into the DPI/WEOP database for Precollege Programs. Only then will the child be in our system for repayment for precollege courses to the colleges who are participating through the DPI/WEOP program.

**I. STUDENT INFORMATION**

|                |       |   |     |
|----------------|-------|---|-----|
| Name Last      | First | Middle Initial  |     |
| Street Address | City  | State   | Zip |
| Date of Birth  | Sex   | <input type="checkbox"/> Male <input type="checkbox"/> Female |     |

Check **only one** (For Statistical Purposes)

- Hispanic or Latino     Not Hispanic or Latino
- American Indian or Alaska Native     Asian     Black or African-American     Native Hawaiian/Other Pacific Islander     White

|  |  |                 |
|--|--|-----------------|
| Current Grade Level  | Anticipated Year of High School Graduation |                 |
| <input type="checkbox"/> 5 <input type="checkbox"/> 6 <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12 |  |                 |
| School Presently Attending   | School District Name                       | College Program |

**I HEREBY AUTHORIZE** release of my child's verification of Free or Reduced Price School Meals eligibility to the Precollege Campus and DPI.

|                              |                                |
|------------------------------|--------------------------------|
| Signature of Parent/Guardian | Date Signed <i>Mo./Day/Yr.</i> |
|                              |                                |

**II. VERIFICATION AND RECOMMENDATION**

**Instructions to the Principal, Food Services Authorized Representative, or DPI/WEOP Staff Member:**

Verify that this student is eligible for Free or Reduced Price School Meals and forward this application form to the college or university where the student has applied for admission to a DPI Precollege Program.

Is this student eligible for Free or Reduced Price School Meals?     Yes     No

**I HAVE VERIFIED** that this student is eligible for Free or Reduced Price School Meals and I recommend this student for a DPI Precollege Scholarship.

|                                   |                                |                    |
|-----------------------------------|--------------------------------|--------------------|
| Name of Authorized Representative | Title                          | Telephone Area/No. |
| Verification Signature            | Date Signed <i>Mo./Day/Yr.</i> |                    |
|                                   |                                |                    |