



## Camp SEK Application Form

### Basic Information:

Applicant Name: \_\_\_\_\_ Applicant Date of Birth: \_\_\_\_\_

Form completed by: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Applicant School Name: \_\_\_\_\_ Applicant Grade in Fall 2024: \_\_\_\_\_

### About the Camper:

What is your hope/goals for this Intensive?:

Describe your child's strengths:

Describe your child's weaknesses:

Tell us what we need to know about your child, you and your family:



Describe your child's social involvement:

Describe any mental health history including substance use?:

Describe your child's level of religious and spiritual involvement:

Describe your child's level of outdoor activity:

Are there any medical issues or allergies that we need to know about?:

*Completed Applications can be emailed to: [info@sekintensives.com](mailto:info@sekintensives.com)  
We will follow up via email and phone number with the next steps in our application process.*