

**APPLICATION TO TRY OUT FOR THE SOLON MIDDLE SCHOOL SCIENCE OLYMPIAD
TEAM FOR THE 2018-2019 SCHOOL YEAR**

Please fill this out and e-mail to:

SOTryouts2019@gmail.com

You will not be able to take the test(s) to try out for this team unless this form has been completed and received at the above address on or before September 5th.

Name: _____ Grade: _____

E-mail address: _____

Phone Number: _____

How many years have you participated in Science Olympiad? _____

If you have participated in the past, what events have you studied and competed?

Why do you want to be on this team? (200 words or less – make sure we can read):

Are your parents willing to coach an event if needed? Circle One: Yes No

What other extracurricular activities do you plan to do in the coming school year?

You must be able to compete in all the competitions, approx. 10, in the first few months of 2019. Some are local and will only entail being there on a Saturday, some are overnight trips in which you will be with the team for 2 or possibly more days. Are you committed to a part of the team at each competition if you make the team? Short answer reply, please:

Do you feel you are a team player, and why? (Short answer):

On a scale of 1 to 10, (1 being MOST INTERESTED), how interested are you in doing at least 1 mechanical event? (Circle your answer) 1 2 3 4 5 6 7 8 9 10

If you would like to add any comments – please do so below.