

## National Center for Health Statistics

## Data Detectives Summer Camp

**Camp Application Form**

From the Office of Management and Budget (OMB No. 0920-1185 Exp. Date 07/31/2023):

**NOTICE** - Public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: CDC/ATSDR Information Collection Review Office; 1600 Clifton Road, MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-1185).

**Assurance of Confidentiality** - We take your privacy very seriously. All information that relates to or describes identifiable characteristics of individuals, a practice, or an establishment will be used only for statistical purposes. NCHS staff, contractors and agents will not disclose or release responses in identifiable form without the consent of the individual or establishment in accordance with section 308(d) of the Public Health Service Act (42 USC 242m(d)).

---

 Applicant's last name

---

 Applicant's first name

---

 Applicant's middle initial
**Parent or Guardian Information**

**This section is to be completed by the parent or guardian of camp applicant.**

---

 Last name

---

 First name

---

 Middle initial

 Primary phone number:
 

---

 Alternate phone number:
 

---

 Email address\*:
 

---

\*Please provide an e-mail address that you check frequently. We will be sending updates and announcements regarding your application.

How did you find out about this camp?

School counselor  Science or math Teacher  Internet  Summer fair  
 Other, please specify \_\_\_\_\_

What is your child's current statistical or math knowledge and interest?

---

---

---

---

What would you like your child to gain from this camp? What are your expectations of this camp?

---

---

---

---

I acknowledge that I am the parent/guardian and I confirm that the information included is accurate to the best of my knowledge.