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**Step 1:**

**Registration of Interest**

**Gold CREST| February 2018**

There are three separate stages for registering interest for Gold CREST |February 2018

Step 1. Submit an Initial Registration of Interest no later than 5pm **Tuesday 20th February**

Step 2. Participate in the Introduction to Gold CREST seminar on Friday **23 February**

Step 3. Submit an Application to Participate in Gold CREST 2013-2014 **no later than 5 pm,**

 **Friday 9 March**

* **You MUST be a Year 12 student to register for Gold CREST.**
* **You must have completed either a Silver, Team Silver, Silver Challenge or Team Silver Challenge to be eligible to register for Gold CREST**
* **To ensure consistency: to register for an Individual Gold you must have completed an individual Silver or Silver Challenge CREST ; to register for a Team Gold you must have completed a Team Silver or Team Silver Challenge CREST**
* **No late registrations will be accepted.**
* **Please note that no more than three projects will be accepted in this application round.**
* ***Applications to Participate in Gold CREST February 2018* must be received by 9 March. The Silver CREST reports, a Teacher’s Perspective and Student Applications will be forwarded to an independent panel of project evaluators who will then identify the successful Gold CREST projects. CREST will then offer a Gold CREST place to the student/s involved with that project.**

**Please note: a Team Gold CREST= one project**

* **Neither the CREST Co-ordinator nor the national Gold CREST Assessor will be involved in the selection process.**

**This is Step 1: Initial Registration of Interest**

 **Gold CREST 2018-2019**

* Please email the Initial Registration of Interest by **no later than 5pm 20 February** to crest@royalsociety.org.nz
* On receipt of this form CREST NZ will contact you and forward your contact details to the

National Gold CREST Assessor so that arrangements for your participation in the 23 February GOLD CREST Seminar can be finalised.

1. **Student Details**

 PLEASE PRINT CLEARLY

STUDENT’S NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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1. **As a prospective Gold CREST student( Please tick where appropriate):**
* I understand that I must have completed a Silver, Team Silver, Silver Challenge or Team Silver challenge CREST before I begin my Gold.

My/Our Silver or Silver Challenge CREST was awarded in 20......

* I am interested in registering for an Individual Gold CREST
* We are interested in registering for Team Gold CREST ( both of you will need to have completed a Team Silver CREST)
* I am/We are Year 12 student/s.

🞎 My/Our Supervising teacher and I/us are available to participate in the 1st Gold CREST

 Seminar, by Skype conference: **11 23 February 3.30 pm**

🞎 I understand that if I/We leave school I/we will no longer be able to continue with our/my

 Gold CREST.

 **Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

STUDENT/s DATE

1. **Supervising teacher’s details**

PLEASE PRINT CLEARLY

NAME: ....................................................................................................

DDI AND EXT ...................................................................................................

CELL PHONE NUMBER: ...................................................................................................

EMAIL ADDRESS: ....................................................................................................

SCHOOL ADDRESS: ....................................................................................................

 ...................................................................................................

POSTCODE: ..................................................................................................

SCHOOL PHONE NUMBER ..................................................................................................

1. **As a prospective Gold CREST Supervising Teacher, I believe my student/s has/have the ability to successfully undertake a Gold CREST project and I:**
* Will attend the **3:30pm 23 February** Gold CREST Skype Seminar;

Understand I may be required to complete, and submit, a Teacher’s perspective (of the Gold CREST applicant/s **no later than 5 pm, Friday 9 March**

🞎 My/Our school has Skype conferencing facilities Yes/ No

The Skype address is:………………………………………………………………..

**Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** SUPERVISING TEACHER DATE