

The Frank C. Munson Institute of American Maritime Studies

Mystic Seaport

75 Greenmanville Ave. P.O. Box 6000, Mystic, CT 06355-0990

Phone: 860.572.5089 Fax: 860.572.5329

Email: munson@mysticseaport.org

APPLICATION FORM

Name: _____ For nametag, if different: _____

Mailing Address: _____

Phone Number: _____ Gender: M F Date of Birth: _____

Email Address: _____ Social Security #: _____

Emergency Contact

Name: _____ Relationship: _____

Mailing Address: _____

Phone Number: W _____ H _____

Tuition

Fee per course (for credit): \$1350. Fee per course (audit): \$675. Scholarship funds are available. *\$250 / course deposit due upon admittance; balance due on first day of class.*

I would like to register for:

_____ HIST 332 / AMS 401 American Maritime History (Mornings)

_____ HIST 390 / AMS 402 The Maritime History Seminar (Afternoons)

(Pre- or Co-Requisite: America Goes to Sea – HIST 332 / AMS 401)

_____ AMS 411 Independent Research in American Maritime Studies *(with permission)*

Credit

Institution preferred for registration credits:

_____ University of Connecticut

_____ Trinity College

_____ Audit

Accommodations

Will you need Mystic Seaport housing? Y N

Rooms are in historic houses adjacent to the museum and include bed, desk, dresser, and furnished kitchen. _____ Shared double room (\$550) _____ Single room (\$700)

Optional: How would you describe yourself?

- Native American / Eskimo / Aleut Hispanic /Latino
- African American / Black White / Caucasian
- Asian American / Asian Mixed racial
- Mexican American / Mexican Puerto Rican
- Other

Indicate country of birth:

Self _____
 Father _____
 Mother _____

Occupation (attach resume or CV, if you wish): _____

Previous College Undergraduate and Graduate Work:

Institution	Dates attended	Major	Degree	Date of Degree

How will the Munson Institute courses help further your educational/professional or personal goals?

Are you a Mystic Seaport staff member or volunteer with more than 100 hours? If so, please briefly describe your work at the museum: _____

How did you learn about the Munson Institute's summer courses?

- College catalogue Brochure Poster Alum / us
- Web site Other: _____

References (name, title, address, phone):

Please return completed application with college transcripts (unless auditing) to:

Munson Institute of American Maritime Studies
 75 Greenmanville Avenue, P.O. Box 6000
 Mystic, CT 06355-0990

I verify that all of the information listed above is true, to the best of my knowledge.

Applicant Signature _____

Date _____