Name of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_\_\_\_\_\_

Current school: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Problem: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Division: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How many years have you the applicant participated in Odyssey of the Mind? \_\_\_\_\_\_\_\_\_\_\_\_\_\_

A letter of recommendation from a teacher or coach in a sealed envelope with signature across the seal. This can be mailed separately or sent with the application.

Recommendation made by:

\_\_\_\_\_\_ Coach \_\_\_\_\_\_ Teacher \_\_\_\_\_\_ School Contact \_\_\_\_\_

Other (explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student answers the following question in a typed document.

1. What are your college plans?
2. What was the most important lesson that you learned as a result of your participation in the Odyssey o the Mind Program?
3. How will you “give back” to Odyssey of the Mind?
4. How will you use the lessons you’ve learned in Odyssey of the Mind in your future life and career?
5. What advice would you give a young person who’s trying to decide whether or not to join an Odyssey of the Mind team?

**This form should be completed and returned by January 29, 2021 to:**

SPACE COAST ODYSSEY OF THE MIND

1105 Baywood Court

Malabar, FL 32950

Or Email to:

spacecoastom@gmail.com