

# WRITING THE COLLEGE ESSAY

## Welcome, Incoming Seniors!

Applying for college or a scholarship in the fall?

Interested in developing the skills you need to write a college essay that stands out from the crowd?

Get a head start and sign up for Writing the College Essay, a week-long summer workshop.

At the end of the week, you will have revised drafts of two college essays.

#### INSTRUCTORS

**Michelle Kenney** has taught high school writing for 12 years at Madison and Marshall high schools. She is an essayist and an experienced language arts teacher.

**Chris Hawking** has taught IB and language arts at Rex Putnam High School as well as a college creative nonfiction class. He currently serves as a North Clackamas SD instructional equity coach.

Both of these educators are also Oregon Writing Project coaches. Each will teach one section of Writing the College Essay both weeks so that no group is larger than 15.

- Read and analyze college and scholarship essays that rock
- Perfect your personal style
- Write sentences that sizzle.
- Draft, revise, edit, and share a college essay that will get you noticed

#### **WORKSHOP DATES**

**SESSION 1** June 20-24, 2016, 9 a.m.-noon

**SESSION 2** June 27-July 1, 2016, 9 a.m.-noon

**COST** \$175

**LOCATION** Grant High School 2245 NE 36<sup>th</sup> Ave, Portland, OR

See reverse for registration form

**OREGON WRITING PROJECT** at Lewis & Clark College

SUMMER PROGRAMS IN PORTLAND

### Writers' Program 2016 Registration Form

Writer's Name:	Nickname:
DEADLINE for submission of form: ONE W	EEK BEFORE SESSION BEGINS
Student's Information:	
I am enrolling my student in (PLEASE CIRCLE ONE): Session 1	Session 2
June 20 – 24, 2016	June 27 – July 1, 2016
9 a.m. – 12 p.m. (Fee \$175)	9 a.m. – 12 p.m. (Fee \$175)
Parent/Guardian Name(s):	
Address:	
City:	
Best Daytime Contact Phone (s):	
Parent(s) email Address:	
School September 2016:	
Grade Sept. 2016: Date of Birth:	Male Female
Health/Emergency Contact Information: Name of Emergency Contact:	
Best Daytime Phone Number(s):	
Student's Physician:	
Physician's Phone:	
Allergies, if any:	
List any medical problems that our staff should know a	about:
<i>Payment Information:</i> Check enclosed payable to Lewis & Clark College	Charge to my VISA/Mastercard
Card Holder Name (please print)	
Card No	
Exp. Date / V Code (on back)	Amount \$
Card Holder Signature	
Card Holder Phone Number	
Up to date information about the location for all these session http://graduate.lclark.edu/programs/oregon_writing_project/	
	Submit this form and payment to

Linda Christensen, Director Oregon Writing Project Lewis & Clark – MSC 85 0615 SW Palatine Hill Rd. Portland, OR 97219-7899

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