



Aboriginal Programs and Services

Indigenous Summer Scholars Camp

The University of British Columbia

Camp Application Form 2017

Application Deadline: 4p.m. by Friday, June 2nd 2017

Applicant's General Information (please write in the space provided or check where applicable)			
Name:		Phone Number: ()	
Birthdate: Month _____ / Day _____ / Year _____		Mobile Number: ()	
Age:	Female <input type="checkbox"/>	Male <input type="checkbox"/>	Email Address:
Please specify your heritage: <input type="checkbox"/> Non Aboriginal <input type="checkbox"/> Métis <input type="checkbox"/> Inuit			
<input type="checkbox"/> Status First Nation → Band name: _____			
<input type="checkbox"/> Non Status First Nation → Band name: _____			
What is the applicant shirt size: <input type="checkbox"/> Adult Small <input type="checkbox"/> Adult Medium <input type="checkbox"/> Adult Large <input type="checkbox"/> Adult X-Large			
If you have attended the camp before, please indicate what year?			
Current Mailing Address			
Street Number:	Apt. Number:	Street Name:	
City:		P.O. Box:	
Province:	Postal Code:		
Parental/Guardian Contact Information (Primary)		Emergency Contact Information (Secondary)	
Full Name:	Relationship:	Full Name:	Relationship:
Day Phone:	Evening Phone:	Day Phone:	Evening Phone:
Cell Phone	Email:	Cell Phone:	Email:
City:		City:	





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About the Applicant (To be completed by the applicant – please answer all questions)

What are your future educational and career goals?

Why are you applying for UBC's Indigenous Scholars Summer Camp?

What are your interests in school? (E.g. learning preferences, favourite subjects, and why?)

What are your interests outside of school? (E.g. cultural interests, hobbies, sports, extracurricular activities, etc.)





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Applicants Personal Information (Please read and answer each question carefully)

Applicant Care Card Number:

Applicant is immunized? Yes No

This camp involves moderate to rigorous daily physical activity.

Is the applicant able to walk approximately 3km per day? Yes No

Are there any physical conditions/concerns that we should be aware of? Please explain

Any issues regarding smudging? Yes No

We have an Elder visit the camp and perform smudging ceremony, usually to start the camp in a good way. Smudging occurs in an area that has proper ventilation. If you answered yes, please provide further information on issues regarding smudging.

Advertising and Promotional Feedback

How did you hear about this summer Scholars camp?

Poster Organization Relative/Friend Internet (email / Facebook/twitter/)

Radio

Other (please explain) _____





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Transportation

To ensure safety and protection of the applicant while at summer camp, we require that parents/guardians indicate who can provide transportation for the applicant. When picking up your child, we will require a photo ID to ensure that the proper person is responsible for your child's transportation.

Please indicate the names of individuals that have permission to provide transportation for the applicant.

Does the applicant have permission to take public transportation for the purpose of arriving/leaving camp? Yes No

Roommate Request (Optional)

Does the applicant know someone who is applying to camp this year? Although campers get their own individualized room, they will be sharing a bathroom with another camper. We want to let you have a say in who the applicant is sharing a bath with!

This applicant will be sharing a bathroom with someone of the same gender. We do our best to accommodate all requests, however, we DO NOT guarantee them. All placements are subject to availability.

Roommate Request: _____

Family Meal

We provide a family meal for camper and their immediate family. The date of this meal is to be announced but we require the number of family members (including the camper) that will be in attendance to ensure everyone has enough food.

How many people would be attending the family meal? _____

Are there any dietary restrictions? _____





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Medical Information

We request this medical information in order to ensure that we can meet the health and safety needs of all applicants. We also keep this information completely confidential.

Does your child have any of the following medical conditions?

Asthma?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Diabetes?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Head or back conditions or injuries (in the past year)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Diagnosed with ADD or ADHD?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Sever anxiety or panic attacks?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Wears a medic alert bracelet, neck chain, or a medial alert card?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Hospitalized for more than 24 hours within the last year?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Allergic to food, medication, insect stings, etc.?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Identified as anaphylactic?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Chronic medical condition(s)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Physical mobility restrictions (any limitations that would prevent participation in camp activities)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Fainting, dizziness, or sudden loss of consciousness?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Dietary restrictions (E.g. lactose intolerance, celiac, vegetarian)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Requires daily medication?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Requires medication for emergency purposes (EpiPen, Asthma puffer, insulin, and/or other)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Does your child have any additional medical needs, health or emotional concerns the camp should be made aware of? Please describe.





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Note on Medication

We ask all medication be in the original packaging (pill bottles). Medication must match camper's name.

If the applicant has medication that is not prescribed (including Tylenol, Advil, or other over the counter drugs) you must provide a doctor's note explaining in detail the procedure of taking the medication, as well as the contact information for that doctor.

Cell Phones and Electronic Devices

We advise campers to not bring cell phones or other similar electronic devices (laptops, tablets, etc.). Unfortunately these devices tend to impede the camp experience and opportunities to build social relationships for the child. Camp activities may involve outdoor activities that can lead to damage of and unfortunately, we cannot guarantee the security and safety of these items.

Another worry regarding electronic devices is the rate that these items tend to be forgotten at the end of camp sessions. We would love if everything the camper brings with them returns back home at the end of the program!

If campers do bring cell phones or other electronic devices (i.e., for emergency purposes) we ask that they **leave them in their rooms** while we are engaging in daily camp activities. If said items are brought out during the day, camp counsellors and the camp coordinator may confiscate the electronic device until the end of the day. If the student continues to bring the device after a first warning, they could potentially be removed from the rest of the camp program.

Parent Consent

I/We, the undersigned, parent/guardian of the aforementioned child, do hereby consent to his/her participation in the Indigenous summer Scholars Camp program. I/We understand that incomplete, false, or misleading application may jeopardize my/our child's opportunity to attend Indigenous Summer Scholars Camp. I/We have carefully read all the information provided and completed the application truthfully and to the best of my/our knowledge. I/We understand this agreement and hereby consent to have my/our child participate in the Indigenous Summer Scholars Camp.

Parent/Guardian Name (Print)

Parent/Guardian Signature

Date

Applicants Signature

Date

Please Note: **Deadline to apply is Friday June 2nd 2017.** Only eligible youth selected (at random) to attend Indigenous Summer Scholars Camp will be contacted by our office.





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Code of Conduct
<input type="checkbox"/> No sharing clothing or touching other people's belongings
<input type="checkbox"/> Be respectful of yourself and others using the space
<input type="checkbox"/> Take direction from Camp leaders, Counselors and facilitators
<input type="checkbox"/> No gossiping, bullying, yelling or harassment
<input type="checkbox"/> I will not use any alcohol, cigarettes or drugs, other than those prescribed to me by my doctor. I understand that if I use alcohol, cigarettes or drugs, I will be sent home as possible, at my own expense.
<input type="checkbox"/> Act like you would in front of a respected elder
<input type="checkbox"/> Dispose of your garbage, recycle and compost
<input type="checkbox"/> Clean up after yourself- don't leave unwanted items behind
<input type="checkbox"/> I will be respectful of quiet times and other housing rules at UBC Okanagan
<input type="checkbox"/> No shoes on furniture
<input type="checkbox"/> Have fun and be open to others and camp activities

Once this application form is complete, please mail or fax it to:

Aboriginal Programs and Services
212C UNC – 3272 University Way
Kelowna, BC Canada V1V 1V7
Phone: (250) 807-8787 Fax: (250) 807-8460
Email: indg.summercamp@ubc.ca

