

University Office of Indigenous Affairs



## Indigenous Mini-University Summer Camp 2017



APPLICATION PACKAGE



## Indigenous Student Mini-University Summer Camp July 10-14, 2017

### **Application Requirements:**

- Applicants must be entering Grades 9 to 12
- Be residents of British Columbia
- Be of Indigenous ancestry; status, non-status, First Nations, Métis and Inuit
- Application must be received by May 31st, 2017, 4:30pm
- Accepted students will be notified by June 9th, 2017

### **A Complete Application Package Includes:**

- A Complete Application Form
- A signed Legal Guardian Consent Form from the camper's legal guardian
- A complete Rules and Regulations Form
- One letter a reference from a counsellor, support worker, teacher, coach, principal or someone from an Indigenous organization

#### Send the complete application package to:

Shane Hartman, Indigenous Community Liaison & Outreach Coordinator First Peoples House, University of Victoria P.O. Box 1700 STN CSC Victoria, BC V8W 2Y2 Applications can also be emailed to: miniu@uvic.ca or faxed to: (250) 472-4952

Space is limited. Each age group, gender, and geographical region may be limited to ensure a diverse representation of students. Priority is given to first time attendees.

### Camp Fees:

- Please do not send money at this time. A \$50 non-refundable registration fee will be required from each student participant when they are accepted into the Mini University. Payment must be received in full by July 6th, 2017.
- Students will be responsible for transportation to and from the University of Victoria (UVic), and for all personal spending money.
- UVic will cover all other program costs.
- An information package with camp details will be mailed upon receipt of the registration fee.

# APPLICATION FORM Indigenous Student Mini-University Summer Camp 2017

Name (please print):
Mailing address:
Phone Number: () Alternate #: ()
Email:
Gender: Male Female Birth date (Month/Day/Year):
My Indigenous ancestry is:
I am: Status Non-Status Métis Inuit
Have you participated in this camp before? Yes No
SCHOOL INFORMATION
Name of school:
What Grade will you be starting in September?
Counsellor:
School phone number: (
School fax number: (
EMERGENCY CONTACT INFORMATION
Contact name (s):
Relationship to applicant:
Daytime phone number: (
Evening phone number: (
Email:
HEALTH INFORMATION:
Care Card Number:
Doctor's name:
Doctor's phone number: (
Medical issues and special considerations (e.g. injuries, diet, allergies and medication):

#### ON CAMPUS HOUSING AND ROOMMATE SELECTION:

All participants of the camp will stay in Uvic on-campus housing. All students will stay in a single room or double room with a roommate, depending on housing availability. If there is someone of the same gender who you would like to share a double room with, please mark that person's name here and we will do our best to accommodate you.

Name of preferred roommate:
Additionally, if you are expecting to attend with another applicant (s), please provide:
Their name (s):
Their relationship (s) to you (brother, cousin, friend, etc.):
STUDENT APPLICANT'S SIGNATURE:
Please sign below to acknowledge that the information on this application is true to the best of your knowledge and that you understand the following:  1. Attendance at camp is mandatory. Unless you are sick, you are expected to be at the camp every day. If you leave the camp, you will be subject to being sent home at the expense of your parent (s)/guardian (s).  2. The University of Victoria Indigenous Student Mini-University Summer Camp program reserves the right to refuse further participation to any participant for any inappropriate behaviour and/or failure to respect the camp rules and regulations.  3. Throughout the week of the camp, all students will be supervised by a UVic chaperone.
Applicant's printed name:
Applicant's signature:
Date:
PARENT/LEGAL GUARDIAN CONSENT FORM:

I hereby grant (*Student's name:*) \_\_\_\_\_\_ permission to participate in the University of Victoria Indigenous Student Mini-University Summer Camp program from July 10—14, 2017.

1. I am aware that participation in recreation and athletic activity involves the risk of personal injury. Any

- 1. I am aware that participation in recreation and athletic activity involves the risk of personal injury. Any use of equipment facilities and programs of UVic, and my or this student's participation in such activities shall constitute acceptance of the risk regardless of the nature of the injury. I, therefore, consent to and assume all risks and hazards of and incidental to the participation of this camp participant in the activities of UVic Indigenous Student Mini-University Summer Camp.
- 2. If I cannot be readily contacted, I authorize the University of Victoria to provide or cause to be provided such medical services as the university or medical personnel consider appropriate.
- 3. The University of Victoria Indigenous Student Mini-University Summer Camp program reserves the right to refuse further participation to any participant for any inappropriate behaviours and/or failure to respect the rules and regulations. Should my or this student fail to abide by the camp rules and regulations, I authorize UVic to have my or this student returned home at my expense.
- 4. By signing this consent, I agree to allow UVic to reproduce the likeness of this student (photo, video, etc.) in promotional materials or publications.
- 5. The information in this application is correct and I am the legal parent or quardian of this student.

#### **RULES AND REGULATIONS FORM**

These rules and regulations are non-negotiable and are set for the best interest of students, staff, chaperones and volunteers. Respect for all camp participants and camp regulations is imperative.

1.	All information on application documents must be completed in order for the student to be considered for participation in the camp.
2.	Participation in all activities is expected and required unless arrangements have been made through the
3.	participant's parent/guardian and camp leaders before the start of the camp.  If a student is unable to participate in a particular kind of activity, please indicate the type of activity and the reason (s) the student is unable to participate below.
3.	and the reason (s) the student is unable to participate below.
	Student Name:
	Activity:
	Reason (s) for not participating:
	Parent/Guardian signature:
4.	Any requested non-scheduled activities on or off-campus must be pre-arranged and pre-
<i>5.</i>	approved by the camp staff and the student's parent/guardian before the start of the camp.  Safety is the utmost concern for all participants—there will be no tolerance for inappropriate behaviour
6.	(as déemed inappropriate by camp leaders).  Absolutely no alcohol, drugs or smoking tolerated.
7.	Absolutely no alcohol, drugs or smoking tolerated. Students must be on time for all activities.
8. 9.	Students must remain in the rooms they are assigned.  Students must be in their assigned room by 11:00 pm unless otherwise indicated by camp staff.
10.	UVic chaperones will be fully responsible for their groups of students and must be consulted first and
11.	foremost with requests and/or questions regarding camp activities, schedule and regulations. Students must have arrangements to be dropped off and picked up at the time indicated on the camp
11.	schedule (students will receive the final schedule upon acceptance to the camp once payment of regis-
	tration fee is received). Please indicate who will be dropping off and picking up this student:
	Drop-off:
	Pick-up:
	Contact Information:
ΙΑ	CKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THIS AGREEMENT
	nted name of parent/guardian:
Sig	nature of parent/guardian:
Dat	re: