



DIRECTIONS Conference Application

Dear Applicant:

Thank you for considering this opportunity to enrich your life through the DIRECTIONS conference! Please take the time to read the application package carefully.

Scope

The DIRECTIONS Conference is a four-day, post-secondary education awareness conference for Indigenous high school students hosted at St. Paul's University College in Waterloo, Ontario. The student delegates participate in the conference to learn about post-secondary education options that are available in the form of university, college, trades and/or apprenticeships. Students participate in cultural teachings and theme-based sessions, which introduces them to the support available in a post-secondary institution.

Theme

The theme and focus of the conference is ESTEEM: Education, Science, Technology, Engineering, Environment and Math.

Goal

The goal of the DIRECTIONS Conference is to promote post-secondary education awareness and build confidence in our student participants. By building awareness of post-secondary options while incorporating cultural teachings and practices, conference participants develop the confidence to pursue greater goals.

Date

The grade 11 & 12 DIRECTIONS Conference takes place **November 5-8, 2018. With travel days of November 4 and November 9. Applications are due Friday, October 26, 2018.**

Please complete the following:

- | | |
|--|--------------------------|
| 1. Nomination Form | <input type="checkbox"/> |
| 2. Transportation Arrangement Form | <input type="checkbox"/> |
| 3. Parental/Guardian Waiver & Consent | <input type="checkbox"/> |
| 4. Student Information | <input type="checkbox"/> |
| 5. Student Profile | <input type="checkbox"/> |
| 6. Student Contract | <input type="checkbox"/> |

Once your application package is complete, please return it to your local high school contact. We look forward to receiving your application.

Thank-you,

Cheryl Maksymyk
 Coordinator, Waterloo Indigenous Student Centre
 (519) 885-1460 x25209

Nomination Form

(to be completed by teacher/principal/counselor)

Dear Teacher/Principal/Counselor:

Thank you for nominating your student delegate for the DIRECTIONS program. Showing students' options beyond high school and providing them with life skills experiences will help them reach their goals or pursue a career they might never have considered.

We are committed to helping your student reach their potential by motivating them to finish high school, and realize the opportunity of pursuing a post-secondary education. More information about our program can be found on [our website](#) at <http://uwaterloo.ca/stpauls/wisc>

For more information, contact:

Cheryl Maksymyk
 Coordinator, Waterloo Indigenous Student Centre
 St. Paul's University College
 University of Waterloo
 190 Westmount Road North
 Waterloo, ON N2L 3G5
cmaksymyk@uwaterloo.ca
 (519) 885-1460 ext. 25209
 Fax: 519-885-6364

Teacher/Principal/Counselor Nomination Reference

I am nominating: _____ (student's name)

I have known this student for _____ years.

Your Name: _____

Position: _____

Work Phone No: () _____

Email: _____

Transportation Arrangement Form

(to be completed by a Parent/Guardian/Caregiver)

Student name: (please print) _____

ARRIVAL: (please check one)

- I will be sending the youth on a flight to Kitchener or Toronto where the program will make arrangements to bring them to the program. (Travel subsidies are available for eligible Northern Ontario students.) Flight Details: _____ Flight Time: _____
- I will provide all transportation arrangements for the youth to St. Paul's University College arriving on _____ at _____ a.m. or _____ p.m.
- The youth will be travelling with the parents/guardians of another student in the program. Name of other student: _____

DEPARTURE: (please check one)

- I will be picking the youth up from St. Paul's University College on _____ at _____ a.m. or _____ p.m.
- The youth will return home with the parents/guardians of another student in the program. Name of other student: _____
- I will be sending the youth on a flight home from Kitchener or Toronto where I will pick them up at our local airport. (Travel bursaries are available for eligible Northern Ontario students.) Flight Details: _____ Flight Time: _____
- Other travel arrangements:

Program Fee Payment – Check all that apply

The \$400 subsidized program fee for the week will be paid by:

- Myself
- Their School
- Their Band _____ (please name)
- Partial Bursary for \$ _____
- Full Bursary

Parental/Guardian Waiver & Consent

(to be completed by Parent/Guardian/Caregiver)

I, _____ (print name), am the parent/guardian/caregiver
of _____ (print student name), a participant in the DIRECTIONS program.

I understand that DIRECTIONS is designed to develop academic achievement and will involve some hands-on activities, possible laboratory exercises, and field trips. I understand and agree that I am solely responsible for the youth's behavior and that they are expected to obey all the rules and regulations pertaining to the above noted events and related activities. I also understand that DIRECTIONS is responsible to reduce all risk and has undertaken all reasonable safety precautions to ensure the safety of the conference participants. I will not hold St. Paul's University College, and any associated staff responsible for any injuries to the youth during the program. I hereby release St. Paul's University College and its respective officers, employees, and agents from and against all claims, actions, costs, damages, and expenses with respect to damage and/or bodily injury to the youth as a result of their participation in the DIRECTIONS program.

ASSUMPTION OF RISK

I am aware there are physical risks associated with the youths participation in the above noted event offered through the University of Waterloo, which include, but are not limited to:

- a) injuries or death resulting from travel to and from locations to be visited
- b) insect bites
- c) drowning
- d) allergic reactions to food, plants, and/or soils
- e) injuries such as possible scrapes, broken bones, soft tissue injuries, burns, cuts, sun or wind burns resulting from participation in above noted event and all related activities

PROGRAM EVALUATION

St. Paul's University College is interested in gaining an in-depth understanding of the impacts the DIRECTIONS program is having on youth and communities. Program evaluation is imperative for helping the DIRECTIONS team learn how they can strengthen the conference to better support the participants. We utilize pre- and post- surveys to gain this valuable firsthand information from the students. Occasionally, we may use a student's comment in promotional materials such as: brochures, handouts, and/or Facebook. All comments will remain anonymous, and will be strictly used for promotional purposes for the DIRECTIONS program.

CONSENT

I have read, understood and agree to the above information.

Parent/Guardian signature _____

Date _____

Student Information

(to be completed by student)

Full Name: _____ D.O.B. (M/D/Y) ____/____/____

Parent/Guardian Name: _____

Parent/Guardian Email: _____

Home Phone No: () _____ Other No: () _____

Mailing Address:

Health Card # _____

Do you have any health issues/allergies we need to be aware of? (Please describe)

This program entails some moderate physical activity. Are there any conditions/concerns that might limit your ability to participate? Please explain.

Are you currently on any medications? (Please list)

What is your T-shirt size? _____

How did you hear about this program?

- Website
- Facebook
- Friend
- Teacher/Counselor
- Other _____

Student Contract

(to be completed by the student)

By agreeing to participate, I _____ (print name), agree to the following conditions:

I will:

- 1) abide to the set curfew.
- 2) not leave the building after curfew.
- 3) abide by the rules of this contract as a school trip participant.
- 4) listen to my chaperone.
- 5) not consume any alcohol or drugs not prescribed to me.
- 6) not break any municipal, provincial, or federal laws, including drug use.
- 7) treat my peers and the staff with respect.
- 8) keep an open mind and participate in all events.
- 9) show respect to my fellow students, program staff, and professors by remaining quiet, listening carefully, and refraining from talking during lectures.
- 10) arrive on time to all pre-arranged meetings and have all needed materials.
- 11) use courteous and polite language.
- 12) not bring my cell phone/iPod/Blackberry with me to any lecture, workshop or activity (or it will be taken away for the duration of the activities).
- 13) agree to room assignments and will not make other room arrangements.
- 14) agree to join the DIRECTIONS Facebook Group to communicate with conference delegates and DIRECTIONS staff after the conference is completed.
- 15) agree to the release and use of my image for use by the Waterloo Aboriginal Education Centre website, DIRECTIONS Facebook page, and/or in marketing and promotion of the DIRECTIONS conference.

I understand that I am attending an affiliated high school trip. I will adhere to the rules and conditions of all school trips. I understand that breaking his contract may result in consequences that range in seriousness from notifying my parents/guardians to being removed from the program and sent home at my parents'/guardians' expense. I understand that if I receive funding or a bursary for my participation in the program and I break this contract, I and my parents/guardians will be responsible for repayment of this funding and/or bursary. I accept all responsibilities as the undersigned.

Student Signature

Date