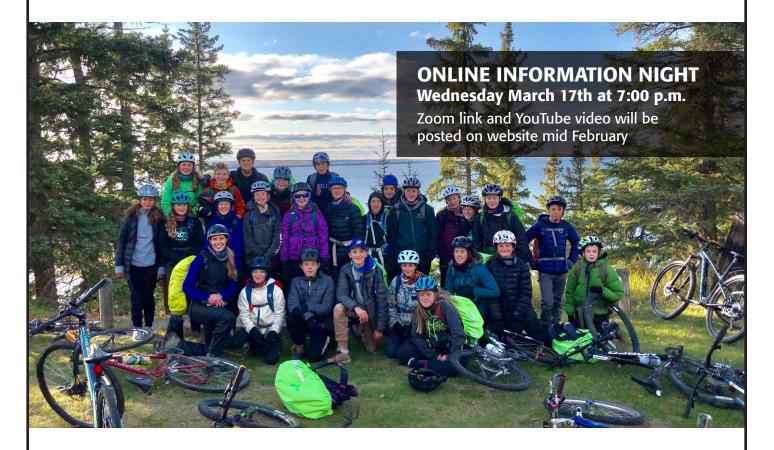
# ECOQUEST

## GRADE 8 OUTDOOR CLASSROOM



Ecoquest invites energetic and committed students who are interested in exploring the natural world and developing the skills to be community leaders. We offer learning outside the classroom within a community of new friends. Ecoquest welcomes students in the Saskatoon Public School Division from a variety of backgrounds, experiences and interests.



#### **APPLICATION REQUIREMENTS**

The application process is meant to challenge you to reflect on what draws you to the program. Please allow yourself time to thoughtfully and thoroughly complete your application. Only complete applications, with all required parts, are considered eligible. Eligible applications will be evaluated based on the School Referral Form and Student Letter of Interest. Do not make any additional add-ons to the application: newspaper articles, pictures, etc.

There are four parts to this application:

- 1. Student Self-Assessment
- 2. Student City Park School Registration Form
- 3. Student Letter of Interest
- 4. School Referral Form sent by school mail

TIME COMMITMEN
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	l participate in approximately 6 ommitment with your current e		ranging from 2-5 days). Consider whether you will be
Please list clubs, sport	s, or activities you belong to (a	nd approximate hrs/week):	
HEALTH AND LEAR	NING		
1. Ecoquest is an incl challenges you experie		ting of different learning nee	ds, styles, and skill levels. Please state any academic
2. Students will be ve conditions, serious alle	ery active in the program and ergies or illnesses you experien	must be capable of physical ace:	activity on a regular basis. Please state any medica
3. Are you able to activ	ely transport yourself to and fror	m school at City Park School (b	ike, bus, walk, etc.)?
☐ Yes	□ No		
4. What level of swimi	ming have you achieved?		
*For safety and liability	y reasons we need to ensure a	ll students are able to swim	00 metres of any stroke.
5. If applying to multip	ple programs please rank them	in order of your preference.	
Ecoquest	ScienceTrek	Let's Lead	Creative Action

#### STUDENT SELF-ASSESSMENT

The Ecoquest program requires a great deal of student responsibility, commitment and effort. The following is an **honest** assessment of whether the Ecoquest program is a good match for you. Please answer the self-assessment statements, then choose an area of growth and strength to elaborate on from #1-13.

Student Self-Assessment	Growth		Strength
I willingly accept the direction of my teachers for personal and academic growth.	1	2	3
2. I comfortably and maturely talk to people in the community and can show appreciation of learning in various spaces.	1	2	3
3. I am able to work with people who I find are challenging due to different opinions, perspectives and work habits.	1	2	3
4. I am able to work independently without direct supervision.	1	2	3
5. I believe that my actions can influence the reputation of my school and the actions of my peers.	1	2	3
6. I recognize when work needs to be done and use my time effectively to complete tasks on time.	1	2	3
7. I willingly volunteer during group work to be a leader and follower and to ensure there is fair distribution of the work load.	1	2	3
8. I enjoy spending time in nature for extended periods and am willing to positively participate in the outdoor camp experience.	1	2	3
9. I am motivated to make safe and mature decisions to ensure safety for myself and the group.	1	2	3
10. I understand that my being on time is important because it impacts myself and others.	1	2	3
11. I accept responsibility for my actions and can communicate to come to a resolution.	1	2	3
12. I can make my own lunch, be responsible for my belongings, and get myself prepared for the day.	1	2	3
13. I am able to self-regulate my behavior to be appropriate in different situations.	1	2	3

Growth:		
_		
Strength:		



# Ecoquest Registration Form 2021-2022 City Park School

	Cros Language & Cultural Brogram at Confederation Bark School				
Students who are not Canadian citizens must cont.	Cree Language & Cultural Program at Confederation Park School  act the				
Newcomer Student Centre, 310 – 21 <sup>st</sup> Street East, (	French Immersion at Alvin Buckwold, College Park, Dundonald, (306) 683-8400 Forest Grove, Henry Kelsey, Lakeview, River Heights and Victoria				
STUDENT INFORMATION					
Student's Legal name	Birthdate Gender				
Last Name	MMM DD YYYY   Male				
	☐ Female				
First Name	Languages First Language				
	Second Language				
Middle Name	Has student ever been registered with Saskatoon Public Schools?				
	☐ Yes ☐ No				
Usual or Called Name	Previous School Attended Previous School's Location				
(If different from First Name)	Previous School Attended Previous School's Location				
First Nations, Inuit and Métis (voluntary self-decla	aration)				
	s Non-Status				
Reserve Name:					
Citizenship Is the named student a Canadian ci	· ———				
If not a Canadian citizen contact Newcomer Stude	· ————				
	ast Country Student Attended School:				
Proof of legal status must be provided in order to re					
☐ Permanent Resident ☐ Refugee Ca	ategory   Parent Work Permit Exp mmm/dd/yyyy				
☐ Study Permit (International Student Program	) Parent Study Permit Exp mmm/dd/yyyy				
Signature of school official	al verifying document				
OFFICE USE ONLY How was the student's na	me and hirthdate verified?				
OFFICE USE ONLY How was the student's name and birthdate verified?  ☐ Birth Certificate ☐ Passport ☐ Status Card					
·					
Signature of school official					
Signature of school official	al verifying document				
Signature of school official STUDENT'S RESIDENCE	STUDENT'S CONTACT INFORMATION				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)	STUDENT'S CONTACT INFORMATION  Area Code Phone				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street	STUDENT'S CONTACT INFORMATION  Area Code Phone  Email  Area Code Cell  Student resides with Two Mother Father				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City	STUDENT'S CONTACT INFORMATION  Area Code Phone Email Area Code Cell				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City	STUDENT'S CONTACT INFORMATION  Area Code Phone  Email  Area Code Cell  Student resides with Two Mother Father				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City	STUDENT'S CONTACT INFORMATION  Area Code Phone  Email  Area Code Cell  Student resides with Two Mother Father Parents Joint Relative Guardian				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City  Province Postal Code  EMERGENCY / MEDICAL INFORMATION	STUDENT'S CONTACT INFORMATION  Area Code Phone Email Area Code Cell Student resides with Two Mother Father Parents Joint Relative Guardian Custody				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City  Province Postal Code  EMERGENCY / MEDICAL INFORMATION	STUDENT'S CONTACT INFORMATION  Area Code Phone  Email  Area Code Cell  Student resides with Two Mother Father Parents Joint Relative Guardian				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City  Province Postal Code  EMERGENCY / MEDICAL INFORMATION  Who should be contacted first in the case of school	STUDENT'S CONTACT INFORMATION  Area Code Phone Email Area Code Cell Student resides with Two Mother Father Parents Joint Relative Guardian Custody				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City  Province Postal Code  EMERGENCY / MEDICAL INFORMATION  Who should be contacted first in the case of school 1.	STUDENT'S CONTACT INFORMATION  Area Code Phone Email Area Code Cell Student resides with Two Mother Father Parents Joint Relative Guardian Custody				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City  Province Postal Code  EMERGENCY / MEDICAL INFORMATION  Who should be contacted first in the case of school 1.  2.  Doctor's Name Phone	STUDENT'S CONTACT INFORMATION  Area Code Phone  Email  Area Code Cell  Student resides with Two Mother Father Parents Joint Relative Guardian Custody  Closure or an emergency? (e.g. Mother, Father, Guardian)				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City  Province Postal Code  EMERGENCY / MEDICAL INFORMATION  Who should be contacted first in the case of school 1.  2.  Doctor's Name Phone	STUDENT'S CONTACT INFORMATION  Area Code Phone Email  Area Code Cell  Student resides with Two Mother Father Parents Joint Relative Guardian  Custody  Closure or an emergency? (e.g. Mother, Father, Guardian)				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City  Province Postal Code  EMERGENCY / MEDICAL INFORMATION  Who should be contacted first in the case of school 1.  2.  Doctor's Name Phone	STUDENT'S CONTACT INFORMATION  Area Code Phone Email  Area Code Cell  Student resides with Two Mother Father Parents Joint Relative Guardian  Custody  Closure or an emergency? (e.g. Mother, Father, Guardian)				
Signature of school official  STUDENT'S RESIDENCE  House Number Apt# (if applicable)  Street  City  Province Postal Code  EMERGENCY / MEDICAL INFORMATION  Who should be contacted first in the case of school 1.  2.  Doctor's Name Phone	STUDENT'S CONTACT INFORMATION  Area Code Phone Email  Area Code Cell  Student resides with Two Mother Father Parents Joint Relative Guardian  Custody  Closure or an emergency? (e.g. Mother, Father, Guardian)  Saskatchewan Health Card Number  Clar medication or requires emergency medication that the school should be aware of.				

First parent/guard	ian	☐ Step Mother	☐ Legal Guardian ☐ Other
Last Name		Address if differe	ent from Student
First Name		House/Apt #	
Title   Mr.	☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.	Street	
☐ Married ☐	Single Separated Divorced Other	City	
Phone (306)		Province	Postal Code
Email		Employer	
Cell ( )		Employer Phone	( )
Second parent/gua	ardian	r 🔲 Step Mothe	r 🗌 Legal Guardian 🗌 Other
Last Name	-	Address if differe	nt from Student
First Name		House/Apt #	
Title	☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.	Street	
☐ Married ☐	Single Separated Divorced Other	City	
Phone ( )		Province	Postal Code
Email		Employer	
Cell ( )		Employer Phone	( )
Third parent/guard	dian ☐ Father ☐ Mother ☐ Step father	☐ Step Mother	☐ Legal Guardian ☐ Other
Last Name		Address if differe	nt from Student
First Name		House/Apt #	
Title	☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.	Street	
☐ Married ☐	Single Separated Divorced Other	City	
Phone ( )		Province	Postal Code
Email		Employer	
Cell ( )		Employer Phone	( )
Fourth parent/gua	rdian	☐ Step Mother	☐ Legal Guardian ☐ Other
Last Name		Address if differe	nt from Student
First Name		House/Apt #	
Title   Mr.	☐ Mrs. ☐ Ms. ☐ Miss ☐ Dr.	Street	
☐ Married ☐	Single Separated Divorced Other	City	
Phone ( )		Province	Postal Code
Email		Employer	
Cell ( )		Employer Phone	( )
CHARDIANCIUD CI	ICTODY OR ACCESS DIGITS	· · · · · · · · · · · · · · · · · · ·	(-)
		e if such document	
Type of Legal Docu		Guardianship	Protection
Copy in Student Re		iry Date (if applicable)	
OFFICE USE ONLY (	NOTES):		
Employees of Saskato	on Public Schools may use the information collected on this	form to help provide a	appropriate educational programming and
support for the student.			
We collect the student	's Saskatchewan Health Number to use in case medical care	is needed. This numb	er, and other demographic information, is
	wan Ministry of Education to support the Student Data System		- /
Health Region for follo	w-up with families regarding the following health services: imn	nunization, vision scree	ening, hearing screening, dental programs
and transportation. Ho	w this information is accessed, used, or disclosed is protected	under the Freedom of	f Information and Protection of Privacy
Act and the Local Aut	thority Freedom of Information and Protection of Privacy A	ct.	
Declaration L the under	ersigned, hereby represent that I have the legal authority to register th	e child. I declare the infor	mation that I have provided on this form is
	and accurate. I will notify the school of any changes to the information		
Date	Signature of Parent / Custodial Parent / Legal Gua	rdian	
Date	Signature of Farent / Custoular Parent / Legal Gud	ıulalı	

#### STUDENT LETTER OF INTEREST

Please write a personalized, typed, one-page letter explaining why you are interested in being in the Ecoquest program next year. In your letter please comment on the following topics, and provide examples for each:

- Your relationship with nature.
- Your relationship with other students.
- Your ability to work independently and make responsible decisions.
- · How you maintain a healthy, active lifestyle.
- · Your academic effort.

This letter must be type-written, and completed by you, the student. You may have an adult proofread your work for grammar and spelling.

\*Please do not sign your name or indicate your name on the letter of interest.

We look forward to receiving your application!

### ECOQUEST IS A SMOKE, ALCOHOL AND DRUG FREE PROGRAM.

#### **ASSOCIATED COSTS**

The cost to the student for this program is \$209.00. Please note that acceptance into the Ecoquest program is not based on the ability to pay. Please contact us if you would like to apply for an Ecoquest Bursary to help cover program costs and equipment. The Ecoquest program has gear available for students to sign out, however, students will need to supply their own bike and U-lock.

\*Please contact us to talk about borrowing a program bike for the year if you do not have access to one.

#### **SUBMITTING YOUR APPLICATION**

The school registration, teacher referral, self-assessment, and student application must be submitted (by mail or dropped off) to the office at City Park School by Friday, April 30, 2021 at 4:00pm. Students must give School Referral form to their homeroom teacher or principal at least one week before deadline for them to submit this page through school mail. Incomplete and late applications will not be eligible. The selection will be completed mid-May. All eligible applicants will be placed in a random lottery. After random selection, students will be notified of their status by email sent out during the first week of June. The waitlist will be a continuation of the random lottery and communication will only occur if a space becomes available. The email (or mailing address if no e-mail is entered) used on the "First parent/guardian" section of the school registration form will be used to communicate acceptance or rejection into the program. It will be sent with a delivery receipt. If the email indicates that you have been accepted into the program, please respond to that e-mail with your status of accepting or declining the program for 2021-2022.

Your signature below indicates your understanding of, and agreement with, the information outlined in the application.

Student:	Parent/Guardian:
Date:	Date:



#### **SCHOOL REFERRAL FORM**

Student:	School:	
Teacher:	Signature:	Date:
Administrator:	Signature:	Date:
Does your school support this student's application to atte	end the Ecoquest program?	s No

Dear School,

The school's confidential recommendation is an important part of the Ecoquest selection process. Here is some background information on Ecoquest's student expectations and experiences.

- Due to the integrated nature of the Ecoquest program, students must demonstrate a significant level of dependability, responsibility and independence.
- Throughout the program students are very busy with many overlapping responsibilities and assignments.
- Students are occasionally unsupervised and work independently on research projects.
- Students will be traveling to and working in a number of different settings ranging from urban to wilderness, and classroom to independent field work.
- The success and safety of the program and its participants depends on safe and mature individual actions.

School Assessment	Growth		Strength
Student willingly accepts the direction of teachers for academic growth and asks for help or clarification.	1	2	3
Student is able to work with people who they find are challenging due to different opinions, perspectives and work habits.	1	2	3
3. Student is able to work independently without direct supervision.	1	2	3
4. Student recognizes when work needs to be done and uses time effectively to complete tasks.	1	2	3
5. Student willingly volunteers during group work to be a leader and follower and to ensure there is fair distribution of the work load.	1	2	3
6. Student is motivated to make safe and mature decisions to ensure safety for themselves and the group.	1	2	3
7. Student understands that being on time is important because it impacts themselves and others.	1	2	3
8. Student accepts responsibility for his/her actions and can communicate to come to a resolution.	1	2	3
9. Student is responsible for his/her belongings and is prepared for the day.	1	2	3
10. Student willingly participates in opportunities for physical activity in phys-ed, at recess, intramurals, and sports teams.	1	2	3

## **SCHOOL REFERRAL FORM**

Considering Ecoquest is a program that has 6 multi-day trips and is out in the community please comment on the student' ability to make safe decisions and self-regulate and an area of growth based on the above statements 1-10.					

\*PLEASE SEND BY SCHOOL MAIL TO CITY PARK SCHOOL