



Native American Fish and Wildlife Society

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ALASKA SUMMMER YOUTH PRACTICUM

***ALASKA NATIVE YOUTH ONLY**

**Native American Fish & Wildlife Society
Alaska Region**

When: July 10- 15, 2023

Where: Alaska Pacific University Campus- Anchorage, AK

Who: 10th – 12th grade Native Youth by Fall 2023.

******Graduating seniors eligible, if still 17 by July 22, 2023

The Practicum is open to all Native American high school students from Alaska who have an interest in pursuing a career in fishery and wildlife management, forestry, range management, watershed management, hydrology, or other natural resources related field. The Practicum provides a "hands-on" learning experience in natural resource management and combines classroom with field sessions that enables students to learn concepts and techniques used to manage natural resources. The Practicum is provided by the Alaska Region of the Native American Fish and Wildlife Society at *no- cost to the participating students*.

Some strenuous hiking will be involved. For more information, contact Kaitlyn Demoski at: KDemoski@nafws.org or (907) 242- 4789.

All Applications must be received or postmarked by June by June 8, 2023, and students will be notified by June 17, 2023. Only COMPLETE APPLICATIONS will be accepted.

Celebrating 40 years of serving tribes

**Alaska Region
Native American Fish & Wildlife Society
2023 Natural Resources Youth Practicum**

CHECKLIST

Make sure you have completed and enclosed the following materials:

- Application Form
- Essay
- Signed Student/Parent Contract, Signed Picture Release Statement (Same Page) Student
- Emergency Medical Information Form

ALL APPLICATIONS MUST BE RECEIVED BY June 8, 2023.

SEND COMPLETED APPLICATIONS TO:

Kaitlyn Demoski
Email: KDemoski@nafws.org
Phone: (907) 242-4789

**NAFWS-Alaska Region
2023 Natural Resources Youth Practicum**

Application /Admission Form

Name: _____

Address: _____ City: _____

State: _____ Zip Code: _____

Phone: _____ Birthdate/Age: _____

School: _____ Grade (Fall 2023): _____

Tribal Affiliation: _____ Enrollment #: _____

Name of Parent(s) or Guardian(s): _____

Phone Number of Parent(s) or Guardian(s): _____

E-mail Address: _____

Emergency Contact Information: (For Emergency Purposes Only)

Name of Next of Kin: _____ Relationship: _____

Phone Number of Next of Kin: _____

Special Food/Dietary Restrictions: _____

T- Shirt Size - Sm Med Lg XLg XXLg **Please circle T-shirt Size. Other Size:** _____

ON A SEPARATE SHEET OF PAPER, PLEASE PREPARE A SHORT ESSAY WHICH INCLUDES:

- Your interests and activities in Natural Resources such as fisheries, wildlife, forestry, and range management.
- What is Natural Resources Management and Conservation?
- What area of Natural Resources Management and Conservation would you like to learn more about and why?
- What area of Natural Resources Management and Conservation do you feel is most important to our future and why?
- What kind of Natural Resources Management and Conservation is being done on your Reservation or Tribal lands? What would you do to improve it?

EMERGENCY MEDICAL INFORMATION – 2023 PRACTICUM
(To be filled out by Parent or Guardian)

Student Name: _____ Phone: _____

Address: _____ City: _____

State: _____ Zip: _____

Parent/Guardian: _____ Work Phone: _____

Relationship to Student: _____

Physician's Name: _____

Physician's Address: _____

Physician's Phone Number: _____

Medical Insurance Company: _____

Policy Number: _____

Is your child eligible for Indian Health Service contract health care?

_____ Indian Health Service Unit Address: _____

Indian Health Service Unit Phone Number: _____

Does your child have any physical disabilities?

(explain) _____

Does your child have severe nosebleeds or other physical conditions that require precautions or special treatment?

(explain) _____

Does your child wear glasses or contact lenses? _____

Does your child have Hay Fever? _____ Sinus Problems? _____

If your child has Hay Fever or Sinus Problems, are they on medication?

_____ If yes, what kind of medication? _____

Is your child allergic to Insect bites or stings? _____

Please explain situation with allergies: _____

Has your child had any major illnesses within the past 5 years? _____

If so, please explain: _____

EMERGENCY MEDICAL INFORMATION – 2023 PRACTICUM (Continued)

Is your child currently taking any medication? If yes, what kind? _____

Does your child require assistance to take medication? _____

Is your child allergic to any kind of medication? _____

If yes, what are these medications? _____

IF YOUR CHILD REQUIRES ANY TYPE OF MEDICATION, PLEASE ENSURE THEY HAVE AN ADEQUATE SUPPLY

Please provide any other information you feel is important: _____

**NAFWS – Alaska Region
2023 Natural Resources Youth Practicum
Student/Parent Contract**

Acceptance to the 2023 Alaska Summer Youth Practicum is a privilege and it also requires Students and Parents to assume certain responsibilities.

STUDENT: I, _____, as part of the 2023 Alaska Summer Youth Practicum, accept the conditions stipulated below:

1. I will participate in and be on time for all sessions and activities, unless excused by a staff member.
2. I will always conduct myself in an orderly manner and will be respectful and courteous to everyone.
3. I will sleep where assigned and realize that I will be with people I have never met before.
4. I understand that at bedtime, all lights must be out when requested and that there will be a bed check every night.
5. I understand that drugs, alcohol, or any tobacco products are NOT allowed during the Practicum, and I also understand that if I am caught using drugs, alcohol, or any tobacco products, I will immediately be sent home AT MY PARENTS' EXPENSE.
6. I understand that I will be held responsible for any damage that I have caused to Practicum equipment or to the Alaska Pacific University Campus.
7. I understand that I will adhere to the established quiet time hours and the bedtime lights-out hours established by the Practicum staff.
8. I understand that no water balloons or squirt-guns will be allowed.
9. I understand that NO Portable Music Devices and Cell Phones will be allowed.
LEAVE THEM HOME OR THEY BECOME THE PROPERTY OF THE PRACTICUM.
10. I understand that NO Gang-related or Heavy Metal-related Clothing Will Be Allowed. ALL PANTS WILL BE WORN AT THE WAISTLINE.
11. I will adhere to all rules of the NAFWS Natural Resources Youth Practicum and the Alaska Pacific University Campus .

Signature of Student: _____ **Date:** _____

PARENT/GUARDIAN: I have read, understand and agree with the above terms. Permission is given for my child to participate in all activities and events, and for my child to receive all necessary medical attention should the need arise, with the understanding that I will be contacted immediately. Furthermore:

1. I understand that the Native American Fish & Wildlife Society or their staff will not be responsible for any theft, injury, or illness where my child is concerned.
2. I give permission for any staff member to render first aid to my child if necessary.
3. I give my consent and permission for hospital staff to treat my child in case of emergency, with the understanding that I will be contacted immediately.
4. I understand that my child will be chaperoned responsibly, and every effort will be made to ensure a safe and enjoyable experience.
5. I understand that no drugs, alcohol, or tobacco products are permitted and that if my child is caught with any of these substances, they will immediately be dismissed, and I will be notified to immediately pick them up AT MY OWN EXPENSE.
6. I understand that as part of my child's application, the STUDENT EMERGENCY INFORMATION FORM IS REQUIRED TO BE COMPLETED AND ON FILE.

Signature of Parent/Guardian: _____ **Date:** _____

PICTURE RELEASE STATEMENT: I give permission for my picture to be taken in conjunction with the 2023 Native American Fish & Wildlife Society Alaska Summer Youth Practicum and to be used in newspapers, magazines, videos and other media concerning the Practicum without monetary compensation.

Signature of Student: _____ **Date:** _____

Signature of Parent/Guardian: _____ **Date:** _____