

2023 Fairbanks Youth for Habitat

Are you looking for a FUN summer job?

Are you between the ages of 13* and 14? *You must be 13 by May 30th, 2023 for Beginner Program

Would you like to learn more about careers in fisheries and habitat restoration?

Would you like to make Fairbanks a better place for wildlife and people?

Activities may include:

Streambank restoration
Fish collecting
Water Quality testing
Fish dissections

Tracking migratory birds
Invasive plant removal
Native planting
Local agriculture/farming

To be selected, you must be interested in science and natural resources, be willing to get dirty, deal with bugs and weather, and work hard outdoors. *Applicants are required to interview, and not all applications will be selected to participate.* Selected students will be expected to return for an Advanced Session* in Summer 2024.

*Placement in Advanced Corps is dependent upon successful completion of the 2023 Beginner Program.

Program dates:

Session 1: May 22 – June 2

Session 2: June 5 – June 16

Advanced, Session 3: July 10 – 21

Advanced, Session 4: July 31 – August 11

Monday- Friday, 9:00am – 4:00pm

Your reward for participating: You'll receive a **\$225** stipend for successfully completing the program. You'll also have lots of fun and gain a better understanding and greater appreciation of the natural resources in your local area. If this sounds like a job for you, e-mail or mail your application to:

Chelsea Wettroth

Fairbanks Soil and Water Conservation District

590 University Ave, Ste 2

Fairbanks, AK 99709

chelsea.fswcd@gmail.com

Phone: 907-479-1213, Ext 6

**Applications and completed permission forms* must be received by
April 15th, 2023**

(*Permission forms: Volunteer Services Agreement, Student/Parent Contract, Emergency Contact form)

Application due date: April 15th, 2023

Please fill out the following application and permission forms. Incomplete applications will not be accepted.
(Please note: Not all students who apply will be selected for participation in this program. Students will be interviewed. This is a work experience; the best candidates will be asked to participate.)

Applicant Name: _____

Applicant Mailing Address: _____

Applicant Email: _____

Birth Date: _____ **Current Grade (2022-2023 school year):** _____

School: _____

Parent/Guardian Name: _____ **Relationship to student:** _____

Parent/Guardian Email: _____ **Phone:** _____

Parent/Guardian Name: _____ **Relationship to student:** _____

Parent/Guardian Email: _____ **Phone:** _____

Best Phone Number to deliver FYH information: _____

Please mark your preferred session*:

- Session 1: May 22 - June 2**
- Session 2: June 5 – June 16**
- Advanced, Session 3: July 10 – 21**
- Advanced, Session 4: July 31 – August 11**

*Session dates are not guaranteed, but we will do our best to accommodate preferred dates.

Will the student be able to attend ALL ten days of their selected session? _____

Will the student be available to participate in Advanced Sessions in Summer 2024? _____

Favorite Subjects/Classes in school: _____

Interests/Hobbies: _____

Extracurricular Activities: _____

What do you think are your strengths or weaknesses? (2-3 sentences): _____

What do you hope to gain from participation in this program? (1 paragraph):

Please describe your previous work experience, if any (1-2 sentences):

Please describe your experience in the outdoors (2-3 sentences):

Please describe your current academic and career goals (2-3 sentences):

What is your (adult) t-shirt size? Circle size: XS S M L XL 2X 3X

Please provide 2 references. One must be a teacher or counselor. Provide phone AND email.

1. Name: _____ Relationship to student: _____

Phone: _____ Email: _____

2. Name: _____ Relationship to student: _____

Phone: _____ Email: _____

Email, mail, or deliver applications and forms to:

**Chelsea Wettroth
Fairbanks Soil and Water Conservation District
590 University Ave, Ste 2
Fairbanks, AK 99709
chelsea.fswcd@gmail.com
Phone: 907-479-1213, Ext 6**

STUDENT / PARENT CONTRACT

Acceptance to this program is a privilege that requires students and parents/guardians to assume specific responsibilities.

STUDENT: I, _____, as part of the program accepts the conditions stipulated below:

1. I will participate and be on time to all sessions and activities unless excused by a staff member.
2. I will always be respectful and courteous to everyone.
3. I will not use drugs, alcohol, or tobacco products and I understand that being caught in possession of, or under the influence of any of these substances will result in being dismissed from the program and forfeiting my stipend.
4. I understand that I will be held responsible for any intentional damage I cause to program equipment or facilities.
5. I will follow the directions of the crew leader and/or project partners at all times, and I understand that my refusal to follow directions may lead to dismissal from the program and forfeiture of my stipend.
6. I will adhere to these and all other rules of the program.

Signature of Student: _____ Date: _____

PARENT/GUARDIAN: I, _____ have read, understand, and agree with the above terms. I understand that by signing this form, I give permission for my child to participate in all program activities and events. Furthermore:

1. I agree to indemnify and hold harmless the Fairbanks Soil and Water Conservation District, project cooperators, and program staff, from any costs or liabilities which they may incur as a result of my child's participation in this program.
2. I waive any liabilities that the Fairbanks Soil and Water Conservation District, project cooperators, and program staff, may have to me or my child as a result of any injury to my child because of my child's participation in this program.
3. I give permission for any chaperone or staff member to render basic first aid if necessary.
4. I give my consent and permission for hospital staff to treat my minor child in the case of an emergency.
5. I understand that the students will be chaperoned responsibly, and every effort will be made to ensure a safe and enjoyable experience.
6. I understand that my child may be dismissed from the program at any time for failure to follow rules, poor attendance, or other issues at the discretion of the program's staff. Dismissal from the program includes forfeiture of the stipend.
7. I understand that no drugs, alcohol, or tobacco products are permitted and that if the child in my care is caught in possession of, or under the influence of any of these substances he/she/they will be dismissed from the program and forfeit their stipend.
8. **I understand that as part of my child's application, the HEALTH AND EMERGENCY INFORMATION FORM is required to be completed.**

Parent/Guardian Signature: _____ Date: _____

Photo and Video Release

I hereby grant permission to the Fairbanks Soil and Water Conservation District and other cooperators to photograph my child in connection with the program and to use my child's photographic or video graphic likeness in official publications, displays, newspapers, television, magazines, videos, presentations concerning the program, and on its website without further consideration or compensation. I also understand the photo can be downloaded by a computer user. Therefore, I agree to indemnify and hold harmless Fairbanks Soil and Water Conservation District from any claims.

Parent/Guardian Signature: _____ Date: _____

STUDENT EMERGENCY CONTACT INFORMATION

Student Name: _____

Address: _____

Parent/Guardian Name: _____

Home phone: _____ Work phone: _____ Cell Phone: _____

Person to be contacted if a parent or guardian cannot be reached:

Name: _____ Relationship to Student: _____

Home phone: _____ Work phone: _____ Cell Phone: _____

Address: _____

Physician Name: _____ Phone: _____

Allergic Reaction to: Penicillin: _____ Bee Stings/Insect Bites: _____

Other drugs: _____

Food: _____

Does your child/participant require any special (emergency) medication? (Name and explanation):

Will your child/participant be carrying this medication? (Circle one): Yes / No / Not Applicable

Is your child/participant able to swim? (Circle one): Yes / No

If your child has any diagnoses or unique physical, mental, or social needs that require our special consideration that has not been covered on this form, please explain:

**** The instructors cannot administer over-the-counter medications such as pain relief, stomach relief, and cold medicine. If you feel your child may need such items, please send the medication with your participant. ****

Parent/Guardian Signature

Date

YOUTH SERVICE AGREEMENT AND PARENTAL CONSENT		
Agency: Fairbanks Soil and Water Conservation District		
Project Title: Fairbanks Youth for Habitat		
Youth Name (First, Last):		
Street Address:	City, State, Zip:	
Email:	Phone:	Age: <ul style="list-style-type: none"> • Under 15 • 15-18

Parent or legal guardian name (first, last):

Street Address (if different than minor):	City, State, Zip:
Email:	Home Phone: Mobile: Work:

I understand that the youth above is NOT considered an employee of the Fairbanks Soil and Water Conservation District. The above youth will not receive compensation beyond the agreed upon stipend of \$225 for a two-week program. Youth dismissed from the program for ANY reason forfeits his/her/their stipend. Youth receive no employee benefits for participation in the Youth for Habitat Program. Program participants may be dismissed by Fairbanks Soil and Water Conservation District staff at any time. Participants who choose not to participate in the program at any time forfeit their full stipend.

I understand that all publications, films, videos, artistic or similar endeavors resulting from the above youth's service will become property of the Fairbanks Soil and Water Conservation District and can be used for publications, displays, newspapers, television, magazines, videos, presentations concerning the program, and on its website without further consideration or compensation and not subject to copyright laws.

All materials provided will be returned to the Fairbanks Soil and Water Conservation District upon the project's completion. Any purposeful or neglectful damage caused by a program participant to any equipment or property of the Fairbanks Soil and Water Conservation District or program partners will be replaced or repaired at the cost of the participant or his/her/their guardians. Any personal materials lost or damaged while participating in program activities will not be repaired or replaced by the Fairbanks Soil and Water Conservation District.

I understand the health and physical condition requirements for the position and certify that statements I have checked below are true:

- I know of no medical condition or physical limitation that may adversely affect the above-mentioned youth's ability to perform the tasks required by this program or affect the ability of their group.
- I have filled out the emergency information form and provided the Youth for Habitat program with any medical information that may be necessary for the above youth's safe participation in the program activities.

I do hereby verify that I am the parent or legal guardian of the above youth and consent to their participation in the Fairbanks Youth for Habitat Program.

Parent/Guardian Signature:	Date:
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Emergency Contact Information

Name (first, last):	
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Street Address:	City, State, Zip:
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Email:	Home Phone: Mobile: Work:
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Agency Contact Name: Scott Faulkner	Agency Contact Email & Phone: scott.fswcd@gmail.com 907-322-4999
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Youth will participate in a two-week program session that will take place between May 15th and August 11th, 2023. Hours will be Monday- Friday, 9am-4pm for the duration of the session. Activities will include aquatic habitat restoration, removing invasive plants, fisheries and wildlife research, green infrastructure projects, and other conservation projects.

The agency agrees to provide materials, equipment, and facilities that are available and needed to perform program activities.

Agency Representative Signature:	Date:
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