



Youth LEAD

Waa-ne-nii-gaan-gab-wi-jik- "Future Leaders"



The Saginaw Chippewa Youth LEAD Department is committed to making a healthy difference in the community. Study shows that a structured after school program is healthy for the children, family, as well as the community as a whole. <http://www2.ed.gov/pubs/SafeandSmart/chapter1.html>

Dates and info: Registration is from August 18, 2014 to September 19, 2014; The SCIT Waa-ne-nii-gaan-gab-wi-jik Program will be starting September 2, 2014 and will run through the school year (excluding school cancellations, breaks holidays and all tribal operation closures). There will be no registration fee. Snacks and refreshments will be available for the youth daily in the tribal community kitchen for a minimal fee. Parent/child is responsible for paying for the snacks. The fee collected will directly go to pay for snacks for the year. All youth are welcome to any activities and services available in the Eagles nest. This includes Homework lab, Tribal Library, gym, weight room (pending orientation or direct supervision from staff), and the lounge.

The Waa-ne-nii-gaan-gab-wi-jik program will run from 3:00 pm-5:00pm on regular full school days, all children must be signed out by 5:30 pm. The Waa-ne-nii-gaan-gab-wi-jik program will not run on half days or early outs; there will be scheduled activities for the participants who check in for the day. To ensure the safety of the children enrolled in the program, all children in the Waa-ne-nii-gaan-gab-wi-jik program must be signed out.

Monday-Friday 3PM- 5PM

STUDENT(S) INFORMATION

1. Name: _____ Grade: _____ Sex: _____

Address: _____ City: _____ Zip: _____

Is Student a (check all that applies): SCIT Member SCIT Descendent Other Explain _____
2. Name: _____ Grade: _____ Sex: _____

Address: _____ City: _____ Zip: _____

Is Student a (check all that applies): SCIT Member SCIT Descendent Other Explain _____
3. Name: _____ Grade: _____ Sex: _____

Address: _____ City: _____ Zip: _____

Is Student a (check all that applies): SCIT Member SCIT Descendent Other Explain _____
4. Name: _____ Grade: _____ Sex: _____

Address: _____ City: _____ Zip: _____

Is Student a (check all that applies): SCIT Member SCIT Descendent Other Explain _____

HEALTH INFORMATION

Physician: _____ Phone: _____

Childs Name and Medication(s) being taken by child:

Childs Name and Physical conditions (allergies, diabetes, etc.): _____

LEGAL GUARDIAN INFORMATION

Legal Guardian Name: _____ **Relationship to child:** _____

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

Address: _____

E-Mail: _____

Legal Guardian Name: _____ **Relationship to child:** _____

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

Address: _____

E-Mail: _____

EMERGENCY CONTACTS

In the event of an emergency if a legal guardian cannot be reached, an afterschool program representative will call the emergency contacts provided. The emergency contacts provided must be individuals who can: (1) give permission to administer health care; (2) pick up your child if your child is ill, etc.

- 1. **Name:** _____
 Address: _____
 Home phone: _____ Work phone: _____ Cell phone: _____
 Relationship to student: _____
- 2. **Name:** _____
 Address: _____
 Home phone: _____ Work phone: _____ Cell phone: _____
 Relationship to student: _____

STUDENT PICK UP

Please list people who you authorize to pick up your child/children, from the Waa-ne-nii-gaan-gab-wi-jik Program.

- 1. **Name:** _____
 Address: _____
 Home phone: _____ Work phone: _____ Cell phone: _____
 Relationship to student: _____
- 2. **Name:** _____
 Address: _____
 Home phone: _____ Work phone: _____ Cell phone: _____
 Relationship to student: _____
- 3. **Name:** _____
 Address: _____
 Home phone: _____ Work phone: _____ Cell phone: _____
 Relationship to student: _____

Pickup from anyone that’s not on this list must be prearranged with the Saginaw Chippewa Youth LEAD Office. There is a fifteen minute grace period for the student to be picked up. If the student is not picked up by 5:45pm and all contacts have been tried with no success, then the student will be taken to Saginaw Chippewa Tribal Police. The Legal Guardian will be responsible for any outcome or feedback from the Saginaw Chippewa Police. If this occurs more than twice in a week, without a legitimate excuse than the student will be dismissed from the program.

ATTENDANCE

Youth will be required to sign in each day upon arrival. Once a student 12 years of age or younger arrives at the Eagle’s Nest, they must be signed out by a Legal Guardian or designated pick up person listed above. If the student chooses to leave on their own without permission the Tribal Police will be notified, the Legal Guardian will be notified, and the student will not be eligible to return to the Eagle’s Nest for one week. If your child does not attend school or gets sent home from school for any reason, ill, bad behavior, suspended from school, etc., your child is not allowed to attend the Waa-ne-nii-gaan-gab-wi-jik program that day as well.

Legal guardians do have the option to allow their child to sign himself out of the program by signing and checking the box below:

I give my child permission to sign his/her self out of the Waa-ne-nii-gaan-gab-wi-jik program.

Signature of Legal Guardian: _____

BEHAVIOR

Negative Verbal Behavior or Inappropriate Language will result in the following consequences;

- 1st Infraction-Verbal Warning
- 2nd Infraction- A Legal Guardian will be called to pick up the child. The student may return on the next scheduled program day. If the 2nd misconduct offense occurs on a field trip, the child will not be able to attend the next scheduled field trip.
- 3rd Infraction-Dismissal from program

Negative Physical Behavior will result in the following consequences:

- 1st Infraction-if the incident is witnessed by a staff member, a Legal Guardian will be called to pick up the student from the program. The student is welcome to return after five (5) scheduled program days. If the incident occurs on a trip, the student is welcome to return after five (5) scheduled program days and the student will not be eligible for the next scheduled trip.
- 2nd Infraction-Dismissal from program

BULLYING/ NO TOLERANCE

Bullying of any kind will not be tolerated in our facility. If a bullying incident occurs, all parties involved Legal Guardians' will be called so that it is quickly resolved. The guilty perpetrator will be dismissed from the program. Counseling would be suggested to all involved.

Definition of Bullying is the use of force or [coercion](#) to [abuse](#) or [intimidate](#) others. The behavior can be habitual and involve an imbalance of social or physical [power](#). It can include verbal [harassment](#) or [threat](#), physical [assault](#) or coercion and may be directed repeatedly towards particular victims, perhaps on grounds of [class](#), [race](#), [religion](#), [gender](#), [sexuality](#), [appearance](#), [behavior](#), or [ability](#).^{[2][3]} If bullying is done by a group, it is called [mobbing](#).^[4] The victim of bullying is sometimes referred to as a "target".

Bullying can be defined in many different ways.^[6] Bullying consists of four basic types of abuse – [emotional](#) (sometimes called relational), [verbal](#), [physical](#), and cyber.^[7] It typically involves subtle methods of coercion such as intimidation.

Bullying ranges from simple one-on-one bullying to more complex bullying in which the bully may have one or more "lieutenants" who may seem to be willing to assist the primary bully in his or her bullying activities. Bullying in school and the workplace is also referred to as peer abuse.

A [bullying culture](#) can develop in any context in which human beings interact with each other. This includes [school](#), family, the [workplace](#), home, and neighborhoods.

ALCOHOL/ DRUGS

This is an alcohol and drug free facility. If anyone is caught with alcohol or drugs, the Tribal Police will be notified immediately, followed by a phone call to a Legal Guardian. This will result in an immediate dismissal from the afterschool program.

If I can't not be contacted, my child's emergency contacts listed above cannot be contacted, and/or the physician listed above cannot be reached in an emergency, I authorize parks & recreation employees or legal representatives to obtain emergency medical care for my child while under the Saginaw Chippewa Youth LEAd Waa-ne-nii-gaan-gab-wi-jik Program including transporting or sending my child to an available hospital or physician.

Signature of Legal Guardian: _____ **Date:** _____

These rules are to ensure the safety and integrity of all participants involved with the Waa-ne-nii-gaan-gab-wi-jik Program. They will be enforced so that all participants can enjoy the program. If you have any questions, concerns, or need further explanation of these rules please contact Jen Crawford Youth LEAD Director at 775-4022

USING IMAGES OF CHILDREN
CONSENT FORM FOR USE BY THE SCIT Youth LEAD Department

Parent/Guardian Information:

Name: _____ Home: _____ Work: _____
Cell: _____ E Mail: _____

Name of child: _____

Occasionally, we may take photographs of the children at our facility. We may use these images in printed publications that we produce, as well as on our website or on project display boards at our facility. We may also make video or webcam recordings for department conferences, monitoring or other educational use.

From time to time, our facility may be visited by the media who will take photographs or film footage of a visiting dignitary or other high profile event. Pupils will often appear in these images, which may appear in local or national newspapers, or on televised networks.

To comply with Data Protection Act 1998, we need your permission before we can photograph or make any recordings of your child for promotional purposes. Please answer questions 1 to 4 below, then sign and date the form where shown. Please return the completed form to the Saginaw Chippewa Youth LEAD Department as soon as possible.

Please circle your answer

1. May we use your child's photograph in the printed publications that we for promotional purposes or on project display boards? Yes / No
2. May we use your child's image on our website? Yes / No
3. May we record your child's image on video or webcam? Yes / No
4. Are you happy for your child to appear in the media? Yes / No

Please also note that the conditions for use of these photographs are on the attached form.
I have read and understood the conditions of use.

Parent's/Guardian's signature: _____ **Date:** _____
Signee Name (please print): _____ **Date:** _____

CONDITIONS OF IMAGE USE:

1. This form is valid for one year from the date you sign it. The consent will automatically expire after this time.
2. We will not use the personal details or full names (which means first name and surname) of any child or adult in a photographic image or video, on our website, in any of our printed publications without good reason. For example, we may include the full name of a child in a newsletter to parents if the child has won an award.
3. If we name a child in the text, we will not use a photograph of that child to accompany the article without good reason.
4. We will not include personal e-mail or postal addresses, or telephone fax numbers on video, on our website, in printed publications.

This is to ensure the privacy and identity theft, of anyone involved.

Questions or Concerns? Contact Jen Crawford Youth LEAD Director at (989) 775-4022