**Kids in the Garden Elementary (3rd-5th grade) Program– Student Application**

**Check a box for any of the program dates your child is interested in attending. Your child can attend any or all program dates.**

 Jan. 26th- (1:00-4:00pm) - Pollinators and Food
 Feb. 23rd- (1:00-4:00pm) - Good Bugs, Bad Bugs

 Mar. 23rd- (1:00-4:00pm) - Colors for Pollinators

 Apr. 13th- (1:00-4:00pm) - Honeybees and Beekeeping

**Transportation will NOT be provided to and from the UNCP Kids in the Garden Elementary Program.**

Student Information

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gender: Male Female

Ethnicity: American Indian Bi- Racial/ Multi- Racial Asian/ Pacific Islander Caucasian Hispanic/ Latino African- American

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 Other

School Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

List related activities that your child has been involved with in the last two years \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of school you attended in 2017 – 2018: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To be completed by Parent/ Guardian:

Name of Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Yearly Income (We ask this question is to make sure that all students from all socioeconomic groups have an opportunity to participate in our program):
 under 25,000 25,000- 49,000 50,000- 74,999 75,000- 99,999 more than 100,000

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Additional Information:

In order to best meet the needs of all participants, please describe on a separate sheet of paper any special needs that your child has. Additionally, please provide any other information that you think is important for the selection committee to consider in regards to your child’s application for this program.

**Parent/ Guardian Consent:**

My signature below indicates that I have read and understand all the information included in my child’s application and that by support my child’s application for the Kids in the Garden, requires them to attend 10 Saturday sessions in the fall (1/2 days) and 10 Saturday sessions in the Spring (1/2 days).

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student‘s Personal Statement:**

Please sign this consent form and return this with your application:

*I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agree that if I am invited to participate in the Kid’s in the Garden program and that I elect to participate that I will follow all of the rules of the University of Pembroke and the Kid’s in the Garden instructors. I agree to be a positive participant and to attend all Saturday session during the fall and spring semesters. I understand that I am to complete a research project and that I will participate in the Science fair held at UNCP each February. I also understand that if I violate the rules of UNCP or of the Kid’s in the Garden project, which my parents / guardian will be notified and I may be asked to leave the program.*

Please fill out the application and mail or email to anastasia.oxendine@robeson.k12.nc.us or Kaitlin.campbell@uncp.edu or rita.hagevik@uncp.edu.

Anastasia Oxendine, Project Director

 If you have any questions please feel free to email me, please put Kids in the Garden in subject line, **or** bring application to Rita Hagevik in 2240 Oxendine Science Building at UNC Pembroke on the second floor.