

June 17, 2019

RE: 2019 UNCP Project ACCESS Summer Residential Camp

Dear Students and Parents,

Welcome to the 2019 UNCP Project ACCESS (Achieving College Opportunities, Community Engagement, and Student Success) Summer Residential Camp, an initiative funded by the U.S. Department of Indian Education's Office of Indian Education. The goal of Project ACCESS is to improve access to higher education and career preparedness for American Indian youth of Robeson County. The initiative will engage Native youth, their families, and their tribal communities to be active participants in the process. The four-day camp at UNC Pembroke will provide you with valuable experiences that will empower you to learn more about college and career preparedness. Students will be given the opportunity to experience university campus life and learn about the admission and financial aid process.

Per the enclosed agenda, students will learn test taking tips and strategies for improving scores on the SAT and ACT, practice interview skills and complete a resume that highlights the student's qualities and strengths. Between these activities and a number of evening cultural activities, students will learn about UNCP, Robeson County's rich American Indian history, engage with your peers and counselors to develop friendships and networks that will hopefully last a lifetime, and, most importantly, have fun!

**Please carefully review the enclosed information and bring the medical, emergency contact and photography release forms with you during check in on the first day of camp!** If you have any questions, please contact us using the information on the next page. To learn more about UNC Pembroke, please visit [www.uncp.edu](http://www.uncp.edu)

Sincerely,

*Cassie Locklear*

Cassie Locklear  
UNCP Project **ACCESS** Community Engagement Specialist

## 2019 UNCP Project ACCESS Summer Residential Camp

<b>2019 Project ACCESS Summer Camp Agenda</b>			
<b>Sunday</b>			
	3:00-3:45pm	Check-In	UC Center
	4:00pm-5:15pm	INTRO 101: Welcome & Ice Breakers	UC Center
	5:30- 6:30pm	Dinner	Oak Hall Meeting Room
	6:30-8:00pm	Stickball	UNCP Quad Area
	8:00-9:00pm	COMM 101: Talking Circles	Oak Hall Mtg., Rm 2 <sup>nd</sup> Floor
<b>Monday</b>			
	8:00 - 9:00 am	Breakfast	UNCP Dining Hall
	9:15-11:15 am	Strategies 203: SAT/ACT Test Prep	Oxendine Science Bldg., RM 3246 6/24 RM 1258
	11:30-12:15 pm	Lunch	UNCP Cafeteria
	12:30-2:00 pm	COMM 203: College and Career Preparation	UC Computer Lab (Dr. Locklear)
	2:30-3:45pm	FIT 101: Swim Break	UNCP Pool
	4:00-5:00pm	COMM 102: Resumes, Interview & College Prep Skills	UC Computer Lab Career Center
	5:00 - 5:30pm	Dinner	UNCP Dining Hall
	5:30 - 8:00pm	Historical Tour of RC	Oak Hall Departure
	8:00-9:00pm	COMM 101: Talking Circles	Oak Hall Mtg. Rm, 2nd Floor
<b>Tuesday</b>			
	7:15-7:45am	Breakfast	UNCP Dining Hall
	8:00-8:30am	Depart for Field Trip	Old Main
	10:30 am-4:00pm	College Visitation (Campus Tour, On Campus Activity)	Varies
	4:15-7:00 pm	Travel Home and Dinner	Varies
	7:00-8:00pm	Final Essays and Resume Submissions	Computer Lab
	8:00-9:00pm	COMM 101: Talking Circles	Oak Hall Mtg. Rm, 2nd Floor
<b>Wednesday</b>			
	8-8:45am	Breakfast	UNCP Dining Hall
	9:00-10:00am	How Do I Stand Out in High School for College?	UC Computer Lab
	10:15-11:15 am	Museum Tour	Museum of the Southeast
	11:15-11:30am	Group Photo	American Indian
	11:30-12:30pm	Lunch	UNCP Dining Hall
	12:45-2:30pm	COMM 203: Interviews	UC Conference Rm (208,213 & 233)
	2:30-3:00pm	COMM 203: Interview Feedback	
	3:00-4:00pm	Admissions & Financial Aid	Education Bldg. Rm 302
	4:00-4:30pm	Evaluation & Wrap Up (Group Photo)	
	4:30-5:00pm	Check Out & Pick Up	Oak Hall

## 2019 UNCP Project ACCESS Summer Residential Camp

### General Information

- Date of Camp: **June 23-26, July 7-10, July 14-17, July 21-24 and July 28-July 31.**  
Please check with us to make sure we have the student down for the correct camp date. Students are only eligible to attend 1 of the above dates.
- Location: The University of North Carolina at Pembroke
- Directions to Campus:
  - <http://www2.uncp.edu/uncp/directions.htm>
  - Turn off Highway 711/W. Third Street in Pembroke onto University Road. Cross the rail road tracks. Continue north and turn right onto Faculty Row. Oak Residence Hall is on the right.
- Map of Campus: The online map at <https://www.uncp.edu/about/campus-map>.
- Housing:
  - Oak Residence Hall (#C8 - 287on campus map) across from Campus Bookstore and Campus Police.
  - Each student will have a roommate and share a bathroom with the three other students in the two-room suite.
  - Students will have a key for access to their rooms but not to the residence hall. A counselor will be with students at all times. Students are responsible for lost keys and damage to the rooms. **Students will be responsible for all costs associated with lost keys (\$40.00 fee) and any room damages.**
  - Students will have access to the computer lab and Wi-Fi in the residence hall. Therefore, students do not need to bring a computer.



***Oak Residence Hall (looking west). You will park west of Oak Hall (rear of this pic). Enter the building through the double doors above.***

- **Check-in: Sundays, 3:00 p.m., Oak Residence Hall (#C8 - 287on the campus map)**
- Schedule for Program: A schedule of events is included.
- **Check-out: Wednesdays, 4:30 pm- 5 p.m., Oak Residence Hall**
  - **Parents/guardians are invited to join us for the UNCP Admissions Office and Financial Aid presentation from 3:00pm-4 pm. Wrap/Up and Program Evaluations will conclude from 4pm-5pm.**
- Parking: West of Oak Residence Hall (#C8 – 287 on campus map)
- Campus Police: 910.521.6235
- Things to Bring:
  - Sheets (80” by 36”), blanket (rooms can get chilly), pillow, towels, washcloth, soap, shampoo, shower shoes, hair dryer, alarm clock/cell phone, bug spray, sun screen, shorts, hat, comfortable walking shoes, swim attire (for time in the pool if available), and an inquisitive attitude. Toilet paper will be provided.
  - Spending money is optional; meals (breakfast, lunch and dinner) are included. Students can bring snacks/drinks/waters for the evenings.
  - Please limit the amount of money you will bring. Don’t bring valuables.
  - Encouraged: Flash drive with resume/list of jobs/activities/organizations you have been involved in

## 2019 UNCP Project ACCESS Summer Residential Camp

- Not Allowed on Campus:

- Smoking
- Smokeless tobacco
- Illegal substances
- Alcohol

**Staff:**

- Cassie Locklear(Lumbee), UNCP Project ACCESS Community Engagement Specialist, Southeast American Indian Studies Program
  - Email: [cassandra.locklear@uncp.edu](mailto:cassandra.locklear@uncp.edu)
  - Phone: 910.775.4619
  - Fax: 910.522.5795
- 4 Camp Counselors will be assisting with summer programming throughout the entire camp and will reside in the Oak Hall dorms at night.

### UNC Pembroke Camp Program Information Guide

The *Project ACCESS Summer Camp* seeks to engage participants with interactive, fun, rewarding, and safe learning experiences. The program staff is dedicated to giving each participant an experience to remember. UNC Pembroke also makes reasonable accommodations for participants with disabilities. Every effort will be made to assist with any special needs.

#### Accidents and Emergencies

The Emergency Phone Numbers Section of the Parental Consent, Assumption of Risk and Release from Liability section of this form must be filled out completely. It is recommended that all participants have medical coverage prior to attending the program. In case of an emergency or accident involving a participant, the parent/guardian will be contacted following notification of the appropriate emergency personnel. Staff will make requisite provisions to ensure a safe experience.

Participants are required to wear the safety equipment for applicable activities.

#### Participant Conduct

UNC Pembroke believes it is important that participants act in a respectful manner toward other participants and staff. Consequently, there are certain standards and expectations to which participants must be held. The program's goal is to promote strong morals, responsibility, and respect for self, culture, other program participants, and the environment.

#### Capturing Participant's Smiles

Throughout the program, UNC Pembroke's university photographer and others may photograph and/or record program participants. Photos and videos may be used for publications, advertising, social media, and promotional materials. Please indicate your preference for the use of photos/videos of your child for promotional purposes by adding your initials to the desired line.

\_\_\_\_\_ I give permission to UNC Pembroke and the Southeast American Indian Studies Program to use photographs/videos of \_\_\_\_\_ (student's name) while attending the *Project ACCESS Summer Camp*.

\_\_\_\_\_ I do not give permission.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Printed Name

**Parental Consent, Assumption of Risk, and Release from Liability**

The following information will enable the *Project ACCESS Summer Camp* staff and/or local healthcare facilities to provide prompt care to participants in case of an emergency. We must have on file the parental consent information requested below.

Student's Full Name: \_\_\_\_\_

Insurance Company's Name: \_\_\_\_\_

Medical/Hospitalization Insurance Policy #: \_\_\_\_\_

Phone Number of Office Holding Policy: \_\_\_\_\_

**Emergency Phone Numbers**

Parent/Guardian's (Home): \_\_\_\_\_ Parent/Guardian's (Home): \_\_\_\_\_

Work: \_\_\_\_\_ Work: \_\_\_\_\_

Cell: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

**Additional emergency contact in case the parent/guardian(s) cannot be reached:**

Name: \_\_\_\_\_ Relationship to student: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Physical Address: \_\_\_\_\_

I voluntarily agree to allow my child to participate in this activity and hereby accept and assume all such risks, known and unknown, and assume all responsibility for the losses, costs and/or damages following such injury, disability, paralysis or death, even if caused, in whole or part, by the negligence of UNC Pembroke with the exception of willful or gross negligence.

In consideration of allowing my child to participate in this activity, as well as the use of any of the facilities and the use of the equipment, I hereby agree as follows:

1. I certify that my child, \_\_\_\_\_, who is enrolled with this agreement, is in excellent health, and may participate in strenuous physical activities associated with the *Project ACCESS Summer Camp* hosted by the University of North Carolina at Pembroke.
2. TO WAIVE AND RELEASE ANY AND ALL CLAIMS based upon negligence, active or passive with the exception of intentional, wanton or willful misconduct that I may have in the future against any of the following named persons or entities and their officers, directors, employees, representatives, agents and volunteers.
  - a. *Project ACCESS Summer Camp* Program and Staff

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- b. Southeast American Indian Studies Program
- c. The University of North Carolina at Pembroke

3. To release UNC Pembroke, their officers, directors, employees, representatives, agents and volunteers, from liability and responsibility, whatsoever, for any claim of action that I, my estate, heirs, executors or assigns may have for any personal injury, property damage or wrongful death arising from this activity whether caused by active or passive negligence of UNC Pembroke or otherwise with the exception of gross negligence. By executing this document, I agree to hold UNC Pembroke harmless for any injury, including, but not limited to, paralysis or permanent disability, or loss of life, which may occur to my child during this activity and/or instruction.
4. Permission is granted in the agreement for my child to receive emergency medical treatment, if needed, and I certify that there are no limits to my child's participation in *Project ACCESS Summer Camp* activities, except as stated in writing, and included with the Health History/Emergency Medical Information Form, which is attached.
5. I understand and acknowledge that the *Project ACCESS Summer Camp* does not offer any medical insurance to protect against injuries, makes no claims to do so, and has no responsibility for any medical expenses incurred. I understand that each participant must assume the risk, and any related financial responsibility that could result from participation in any of these activities. I agree to assume any risk and financial responsibility.
6. By entering into this agreement, I am not relying on any oral or written representation or statements made by UNC Pembroke, other than what is set forth in this agreement. I further agree that this Agreement shall be governed by and interpreted in accordance with the laws of the State of North Carolina, United States of America.
7. If any provision of this release is found to be unenforceable or invalid, that provision shall be severed from this contract. The remainder of this contract will then be construed as though the unenforceable provision had never been contained in this document.

I hereby authorize the director, assistants, or other persons responsible for my child's care to act on my behalf, according to their best judgment, for said minor in any emergency requiring medical attention, and I hereby waive and release the *Project ACCESS Summer Camp*, staff, the Southeast American Indian Studies Program, and UNC Pembroke of all liability for any illness or injuries incurred while at, or in transit to and from the program.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Printed Name

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**Health History/Emergency Medical Information Form**

Student's Full Name: \_\_\_\_\_

Are there any special needs or accommodations required?  Yes  No

If yes, please specify: \_\_\_\_\_

Are there any activities to be limited as recommended by student's physician?  Yes  No

If yes, please specify: \_\_\_\_\_

Any allergies?  Yes  No If yes, please specify: \_\_\_\_\_

Allergic Reactions: \_\_\_\_\_

Any prescribed medication being taken?  Yes  No

If yes, please specify: \_\_\_\_\_

Any food/dietary restriction?  Yes  No

If yes, please specify: \_\_\_\_\_

Date of last tetanus shot: \_\_\_\_\_

Past illness or other information that would be useful in the event treatment is necessary: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I affirm that the information provided above is true to the best of my knowledge. The student herein described above has permission to engage in all activities relative to the *Project ACCESS Summer Camp*, except as noted.

\_\_\_\_\_  
Parent/Guardian's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian's Printed Name