

## S.O.A.R. II 2020 Application Packet

Thank you for your interest in the S.O.A.R. II program. This letter contains important information about this exciting program. Please read it carefully so that your application will receive due consideration. Because of the large number of expected applicants this year, incomplete applications will not be considered.

The program is tentatively scheduled to begin on Monday June 08, 2020 and conclude on Friday, August 7, 2020. Participants will meet daily between the hours of 8:00 a.m. to 4:00 p.m. Participants are not allowed to miss more than five days throughout the entire program. A typical day includes breakfast, an opening activity, some type of community service, lunch, then a recreational activity. As in the past, there will be at least three excursions, although those will not be confirmed until after the application process is completed.

The fee for this program includes all meals, activities and excursions. Clients are not allowed to bring money, except for special activities, of which you will receive written notice that it is allowed.

I have enclosed an application that must be returned if you are interested. You must include a copy of your most recent report card when submitting your application.

There is also a 'Student Assessment Form' that must be completed by a Teacher, Counselor, Principal or Assistant Principal at school. Please be sure to have your parent/guardian sign it before you ask that person to complete it. The person completing the form can scan the completed form and email it to jennifer@nhutah.org or can mail the form to Neighborhood House, 1050 West 500 South, Salt Lake City, UT 84104.

Interviews are scheduled as applications are returned. Participation is limited to 12 students, so please return the application as soon as possible to be included on the interview list. There is a priority order that will be followed when making selection decisions. To submit your completed application, you have two options:

- 1) You may deliver it to Neighborhood House, 1050 West 500 South, Salt Lake City, during standard business hours: 6:30 a.m. to 5:30 p.m. Monday through Friday.
- 2) You may scan the entire document and send it via email to jennifer@nhutah.org.

If you have any questions, you can email <u>jennifer@nhutah.org</u> or call Neighborhood House at 801-363-4589 Monday – Friday until 5:30 p.m.



## S.O.A.R. II 2020 Application

**This application is a not a guarantee of acceptance**. Potential participants must also be interviewed by the program manager and/or program staff.

| Name   | Date of Birth   |   |  |  |  |
|--|---|---|--|--|--|
| Street Address   |   |   |  |  |  |
| City   | Zip Code  | Phone   |  |  |  |
| E-mail address, if you have  | one:  |   |  |  |  |
| What grade are you currentl  | y in?   |   |  |  |  |
| Name of school currently at  | tending:  |   |  |  |  |
| Grade Point Average:   | Please submit a co  | opy of your most recent report card.  |  |  |  |
| Individuals who do not attend to attend activities or may be  This program is funded throu costs associated with this progto engage in community servinding for this program.  Acceptance notification will complete the intake process, made prior to the first day of  The terms listed here are only by the S.O.A.R. II staff and p | I regularly, miss more that removed from the program gh a private grant. The feet gram, but do assist in off solvice projects as a means take place within 4 week if accepted, additional pathe program. All fees mutthe basics. Additional behavioring at the beginning cates acceptance of the termoved from the program of the program | sipate in planned service projects and activities an 5 days, or are uncooperative may not be allowed am, and their fee will not be returned.  The sessenting the cost for meals. Participants are expected to help our community and those that do provide the setting the cost for meals or by telephone. To apperwork must be completed and fee arrangements that be paid in full by June 05, 2020.  The havior expectations and information will be decided and of the program.  The terms listed as well as verification that the above |  |  |  |
| Applicant's Signature  | and Date  | Parent/Guardian Signature and Date  |  |  |  |



## S.O.A.R. II Application Student Assessment Form

The following student has applied to participate in the Summer Outdoors Activities and Recreation (S.O.A.R.) II program at Neighborhood House this upcoming summer. This nine-week program is designed for 13-15-year-old students that are self-motivated, relate well to others, and are able to work as part of a group. The students are engaged in daily community service, as well as recreational activities. They will also be taking overnight excursions.

To assist with the selection process, we would like some information about the student's school success, attitude, and behavior. This will not be shared with the student and can be scanned and emailed to <a href="mailto:jennifer@nhutah.org">jennifer@nhutah.org</a> or mailed to Neighborhood House, 1050 West 500 South, Salt Lake City, UT 84104 in the self-addressed stamped envelope attached. Your prompt response is appreciated.

| Student's Name  | School   |   |  |  |
|---|--|---|--|--|
| Person completing this form:  |  |   |  |  |
| Official Title:   |  |   |  |  |
| As the parent/legal guardian, I authorize the Co identified school to complete this form, and release t information gathered will be used for program select hold this information strictly confidential. I waive the | he information request<br>ion purposes, and that | ted. I understand that the the S.O.A.R. II staff will |  |  |
| Parent/Legal Guardian Signature   | Date   |   |  |  |
| How well do you know this student? [ ] Very Well  | [ ] Somewhat                                     | [ ] Not very well                                     |  |  |
| Has the student had discipline problems or been susper  | nded from school this                            | year? [] Yes [] No                                    |  |  |
| Is the student a contributor to the school community?  Comments:  | [ ] Yes [  | ] No  |  |  |
| Please identify one of this student's strengths:  |  |   |  |  |
| Please identify one area in which the student may strug (OVER)  | ggle, if any:                                    |   |  |  |



Please complete this section regarding the identified student:

|                                  | Above   | Average | Below   | Unknown |
|----------------------------------|---------|---------|---------|---------|
|                                  | Average |         | Average |         |
| Overall academic performance     |         |         |         |         |
| Social skills/peer relations     |         |         |         |         |
| Demonstrated leadership skills   |         |         |         |         |
| School attendance                |         |         |         |         |
| Overall citizenship behavior     |         |         |         |         |
| Ability to follow school rules   |         |         |         |         |
| Respect for self and others      |         |         |         |         |
| Potential for success in SOAR II |         |         |         |         |

Any other information that would be helpful for us to know about this student as we select students for participation in this program?

If you have any questions about the program, or this form, please contact Jennifer Nuttall, Executive Director, at <a href="mailto:jennifer@nhutah.org">jennifer@nhutah.org</a> or (801) 363-4589.

Thanks for your time!