



ALASKA

A Career & Technical Student Organization

2018-19 Student Application

Complete and submit this application to your teacher leader by December 15, 2018.

STUDENT INFORMATION

Legal Last Name

Legal First Name, MI

Street Address or PO Box

City or Village

State

Zip Code

Email

Home Phone

Mobile Phone

Student State ID #

Birthdate

Gender

- Fem
 Male

Anticipated Graduation Year

Do you qualify for free/reduced lunch?

- Yes
 No

Grade Level

- 9
 10
 11
 12

Race / Ethnicity [✓] all that apply

- Alaska Native / American Indian
 White
 Asian
 Native Hawaiian / Pacific Islander
 Black / African American
 Hispanic/ Latino

PARENT / GUARDIAN INFORMATION

Father / Guardian

Mother / Guardian

Phone #

Phone #

Email

Email

School:

School District

Educators Rising Alaska Advisor:

Have you or will you enroll in Educators Rising Micro-credentials? Check all that apply.

- Anti-bias Instruction Classroom Culture Collaboration Assessment Learner Engagement

Have you or will you enroll in the Education pathway? Check all that apply.

- Course 1 Course 2 Course 3 Course 4

EDUCATORS RISING ALASKA STUDENT COMMITMENT

The goal of Educators Rising Alaska (Educators Rising AK) program is to explore the career of becoming an educator and to provide the support with which you can begin the process. To serve you with a solid academic and collegiate program, we must have a commitment from you. Please carefully review and agree to the following criteria.

I understand that during my participation in the Educators Rising AK program I will:

- Complete high school
- Attend academic and college advising services
- Complete the Educators Rising Micro-credentials (five digital badges) during your high school career **if** available at your school
- Complete the Educators Rising Alaska CTE Pathway (four courses) during your high school career **if** available at your school
- Take the ParaPro Assessment during your senior year

To the best of my knowledge, the information provided on this application is accurate.

Print Student's Name

Student's Signature

Date

The **Educators Rising Alaska State Leadership Conference** is March 7-10, 2019 in Juneau. To attend, you must participate in an Educators Rising competition. Separate online portal registration is **required** and open from **November 15, 2018 – February 8, 2019**. No exceptions.

Do you plan on attending the conference? (If yes, please read and sign below)

Yes No

If yes, which project will you present (choose one)?

- 1. Creative Lecture (individual, open)
- 2. Lesson Planning, choose one: STEM or Arts (individual, closed)
- 3. Children's Literature Pre-K (individual or dual/pair, closed)
- 4. Children's Literature K-3 (individual or dual/pair, closed)
- 5. Inside our Schools (team of 2-4 students, closed)
- 6. Public Speaking (individual, open)

If not, why not? _____

STUDENT GUIDELINES AND BEHAVIOR CODE OF CONDUCT

Educators Rising Alaska State Leadership Conference is an academic extra-curricular activity. In order to maintain a safe, fun, learning environment for the benefit of all participants, students must agree to abide by all of the guidelines in this behavior code of conduct:

- Students are expected to act in a mature and appropriate manner at all times.
- No non-participant visitors are to be allowed on the trip.
- Students are to be respectful of the hotel staff who are trying to do their work at the facilities where the field-trip activities are taking place. Please keep voices low when moving through hallways, and avoid clustering in groups around entrances and exits.
- Students will not use alcohol or other non-prescribed drugs, which includes smoking and chewing tobacco.
- Students will pay for phone calls and any damage they cause.
- Cell phone use, including texting, is prohibited during Educators Rising activities.
- Students are expected to honor the schedule, participate in all activities, and remain with their group's chaperone or attending adult at all times.
- While at the hotel, students must avoid disturbing other hotel guests. [A few examples of disruptive behavior include: shouting from the balconies, running on the stairs and in hallways, turning the volume on televisions up too high, and slamming doors. Students should also avoid loud conversations or activities late at night, or early in the morning hours.]
- If weather or other circumstances delay the trip home, students will agree to remain under the supervision of their chaperone.
- Students on medication should speak to their district chaperone one-on-one regarding what medications they are taking and why.
- Students who have valuables should keep them on their person at all times. If they are concerned about losing their valuables, they should speak with their chaperone one-on-one.

By signing this document, I indicate that I have read with my parent/guardian and understand the Student Guidelines and Behavioral Code of Conduct for Educators Rising Alaska supported events.

I understand that not following these guidelines could result in my being sent home at the expense of my parent/guardian.

Student's Signature

Date

Parent/Guardian's Signature

Date

MEDICAL RELEASE, WAIVER AND INDEMNIFICATION

The undersigned participant and his/her parent or legal guardian do hereby execute this release, waiver, and indemnification for himself/herself, to release the University of Alaska, premises and their officers, employees, and agents from any and all liability, loss, damage, costs, claims, or causes of action including but not limited to all bodily injuries and property damages arising from participation in the Educators Rising Alaska State Leadership Conference on March 7-10, 2019 in Juneau, Alaska. If weather or other circumstances delay my child's return trip home, I release my child into the care, custody, and responsibility of the attending chaperone.

Student's Signature

Date

Parent/Guardian's Signature

Date

AGREEMENT AND CONSENT FOR TREATMENT

This is to certify that I, the undersigned parent or guardian, hereby consent to and authorize the administration and performance of all needed medicines, surgical treatment, and the administration of any anesthetic which in the opinion of the attending physician may be necessary and advisable in the event of any medical emergencies regarding my son or daughter. It is understood that efforts shall be made to contact the undersigned prior to rendering emergency treatment to the patient.

Student's Name (Print clearly)

Date of Birth

Street Address or PO Box

City or Village

State

Zip Code

Student's Health and Accident Insurance Company

List all allergies, especially to medications:

Does the nurse have permission to administer:

Aspirin

Tylenol

Parent/Guardian's Signature

Date

Phone Number

EMERGENCY CONTACT INFORMATION

Name

Relationship to Student

Work / Mobile Phone

Address

City or Village

State

Zip Code