



**BOYS & GIRLS CLUB
OF JANESVILLE**

Boys & Girls Club of Janesville • 200 West Court Street, Janesville WI • bgcjanesville.org • 608-755-0575

Invitation to Apply

Who: 6th, 7th or 8th grade students from Janesville, WI

*older students will be given preference, since this trip is expected to continue in coming years

What: All-expenses paid field trip to Washington, DC (overnight/out of state)

When: July 11-15, 2022

What do you need to do?

1. Complete the attached forms A, B, C and D
2. Get a letter of recommendation
 - a. These need be filled out by day school staff (ex. a teacher), Club staff (ex. the Club Manager) or community members (ex. coach or religious leader).
 - b. They should NOT be filled out by family members.
3. Turn everything in on or before **Friday, March 18 (6:00 pm)** to Boys & Girls Club, 200 West Court Street in Janesville

Then what?

- Applications will be reviewed by a team.
- You will be notified if you are one of the lucky 40 members that will be going to Washington, D.C. by **Friday May 7, 2022**. 10 alternates (5 male; 5 female) will also be notified.
- Join Boys & Girls Club of Janesville and remain a member through Summer 2022 **(\$10 total cost of membership, provides afternoon access to the Club)**
 - It is the family's responsibility to keep contact information (phone and email) current with the Boys & Girls Club. If it is not, the participant may risk losing his or her spot to an alternate
- Attend no fewer than six (6) "CareerLaunch" sessions through Boys & Girls Club of Janesville, to get to know other members going and the chaperones. (Classes offered two nights per week, after school, at Boys & Girls Club.)
- If these requirements are not met, the scholarship will be revoked and an alternate will be selected. Alternates must fulfil the same requirements

Questions: Email Teen Program Manager; Addie Mayfield, at amayfield@bgcjanesville.org or call 608-755-0575

On behalf of Boys & Girls Club of Janesville and Herb Kohl Philanthropies, we look forward to reviewing your child's completed application packet!



FORM A: PARTICIPANT INFORMATION

PARTICIPANT INFORMATION (PLEASE PROVIDE COMPLETE LEGAL NAME)

Any changes in contact information for participant or parent/guardian **MUST** be updated with Boys and Girls Club or participant's spot may be given to an alternate

FIRST MIDDLE

LAST MALE FEMALE OTHER: _____
GENDER (circle one) Please specify

ADDRESS _____ / _____ / _____
DOB

CITY STATE ZIP

T-SHIRT SIZE (circle one):

YOUTH SMALL YOUTH MEDIUM YOUTH LARGE ADULT SMALL
ADULT MEDIUM ADULT LARGE ADULT EXTRA LARGE OTHER: _____

Were you selected as a Washington D.C. 2019 Finalist/Alternate? (Circle One)

Yes No

HEALTH INFORMATION (This information will be kept strictly confidential)

This information is needed so we can accommodate meals and sleeping arrangements. Your answers will not impact eligibility to participate.

ALLERGIES: _____

SPECIAL DIETARY NEEDS (ex: gluten free, vegetarian, etc.) _____

OTHER HABITS WE NEED TO BE AWARE OF (ex: sleep walking, motion sickness, etc.) _____



FORM B: PARENT/GUARDIAN INFORMATION

PARENT/GUARDIAN'S NAME (1st Contact)

Any changes in contact information for participant or parent/guardian **MUST** be updated with Boys and Girls Club or participant's spot may be given to an alternate

FIRST (_____) - _____
PHONE 1

LAST (_____) - _____
PHONE 2

EMAIL

PARENT/GUARDIAN'S NAME (2nd Contact)

FIRST (_____) - _____
PHONE 1

LAST (_____) - _____
PHONE 2

EMAIL

EMERGENCY CONTACT (Week of trip July 11-15, 2022)

FIRST (_____) - _____
PHONE 1

LAST (_____) - _____
PHONE 2

EMAIL

GENERAL INFORMATION (This information will be kept strictly confidential.)

HOUSEHOLD INCOME (circle)

less than \$14,999 \$15,000-\$24,999 \$25,000-\$34,999 \$35,000-\$49,999 \$50,000 and over

What adults does the child primarily live with (check all that apply)

_____ Mother _____ Father _____ Stepmother _____ Stepfather _____ Grandparent _____ Other



FORM C: MEMBER INVOLVEMENT

DAY SCHOOL INFORMATION

SCHOOL NAME (_____) - _____
PHONE NUMBER

PRINCIPAL'S NAME

BOYS & GIRLS CLUBS OF JANESVILLE INFORMATION (If you are not already, becoming a Club Member is a requirement for the trip.)

CLUB NAME CLUB MEMBER SINCE (or will join on*): _____ / _____
MONTH YEAR

***You must be a member of the Boys & Girls Club of Janesville to receive this scholarship. Membership is \$5 for the school year; \$5 for the summer (a total of \$10). You do not need to join the Club until you are notified that you will receive a scholarship. Learn more and find membership application forms online at bgcjanesville.org.**

OTHER COMMUNITY INVOLVEMENT (Sports Teams, Religious Groups, Service Learning, etc.)

ORGANIZATION NAME (_____) - _____
PHONE NUMBER

MAIN CONTACT NAME INVOLVED SINCE: _____ / _____
MONTH YEAR

DESCRIBE PARTICIPATION

ORGANIZATION NAME (_____) - _____
PHONE NUMBER

MAIN CONTACT NAME INVOLVED SINCE: _____ / _____
MONTH YEAR

DESCRIBE PARTICIPATION



FORM D: MEMBER ESSAY QUESTIONS

THIS SECTION TO BE COMPLETED BY THE MEMBER

Below are two (2) essay questions to be written and submitted by the member applying for the out-of-state/overnight field trip. Although this trip will be filled with lots of fun activities, the members will also be expected to take something educational away from their experience. Answer the questions below, keeping in mind how you will use what you learned in Washington D.C. when you return to Janesville. Be creative! ***If you need additional space for your essay questions, please attach final copies to this form.**

WHAT IS SOMETHING THAT YOU HAVE DONE OR SOMETHING THAT YOU PLAN TO DO TO GIVE BACK TO YOUR COMMUNITY?

WHAT IS ONE FUTURE ACADEMIC GOAL THAT YOU HAVE FOR YOURSELF AND HOW DO YOU PLAN TO ACHIEVE IT?



Recommendation form for Boys & Girls Club of Janesville Field Trip

_____ has the opportunity to take part in a trip to Washington D.C. this summer through Boys & Girls Club of Janesville, thanks to a generous donation to the Clubs. All trip participants need to provide a letter of recommendation from non-family members in their life who can provide insight into the character of the member. A limited number of members can attend the trip and this recommendation process will be used to determine who will attend.

To be completed by a Club staff, a current/former teacher, or a community member.

I have known _____ for _____ years.
(Please print student's full name)

Please rate him/her on the following characteristics in terms of the environment where you see the child most often:

AREAS	EXCELLENT	GOOD	FAIR	POOR
Effort				
Social Awareness				
Self-Management				
Self-Awareness				
Relationship Skills				
Responsible Decision Making				
Attendance				
Overall Behavior				

Comments:

NAME (PRINT)

SIGNATURE

_____/_____/_____
TODAY'S DATE

CLUB/SCHOOL/ORGANIZATION