

PARENTS: Please keep this page and return the rest of the application.



Background & Application

The Anacostia Watershed Society's Saturday Environmental Academy (SEA) offers a **FREE outdoor/environmental education opportunity** each fall and spring for 6th, 7th, and 8th graders who live in and near the Anacostia River watershed. Through this unique, fun, educational experience, students learn about their river and local environment, while developing skills in team building, critical thinking, and scientific investigation. Students from DC wards 5, 6, 7, & 8 and MD students within the Anacostia Watershed are strongly encouraged to apply.

The 2024 Spring Program is tentatively scheduled to run on Saturdays from April 6 – May 11. During the program, we will meet from 9:00 a.m. - 1:00 p.m. in front of John Tyler Elementary School at 1001 G Street, SE, DC. From our meeting location, we will venture out together for various environmental activities in our local environment. Activities increase environmental awareness and give students the opportunity to take positive action to improve their environment. This year's academic theme is "Planting Produces Positive Outcomes for Our River!" and will include plantings in our watershed, visits to community gardens and parks, an earth day cleanup, and more. Go to www.anacostiaws.org or visit us on Facebook to learn more about SEA. If interested in applying for the upcoming program, please complete the following forms and submit per the instructions at the end of the application. We ask that families only apply if they feel they can make a commitment to full participation in the program, barring unforeseen circumstances. Some limited exceptions to missing a session are granted (e.g., school testing, sickness, etc.). If you have any questions, please contact Catherine Estes, SEA Program Director, at cestes@anacostiaws.org or 202-368-1169.

Meet new friends, build your resume for high school & college, and help the environment by joining SEA!











Guidelines for Participation

We have found that in order for the Anacostia Watershed Society's Saturday Environmental Academy to be a positive and successful experience for all involved, some basic guidelines are necessary. Accordingly, each student is expected to:

- Commit to attending every Saturday session. Limited exceptions allowed. Catherine Estes, Program Director, must be notified in advance and can be reached at cestes@anacostiaws.org or 202-368-1169 if a student is unable to attend a session.
- Arrive on time for each session (at 9:00 a.m. unless otherwise told), ready to participate fully. Pick-up is promptly at 1:00.
- Follow staff instructions, for the safety of self and others.
- Dress appropriately to be outdoors with the possibility of getting dirty and possibly wet. Closed-toe shoes and long pants are required for every session.
- Be respectful of oneself, others, and one's environment. Expectations include keeping body parts to oneself, using positive language/communication, practicing "leave no trace" ethic in our meeting and outdoor environments, etc. No hitting, name-calling, or use of inappropriate language is allowed.

Also, the use of cell phones and any other electronic devices during the Saturday sessions is generally not permitted. Should a student need to bring a cell phone to make contact with parents/guardians at the end of a session then students must keep them stored away and out of sight during the sessions. If students use electronics without permission while SEA is in session, they will be taken by staff and returned at the end of the session. If parents/guardians need to reach the students during a session, they may call/text Catherine Estes at 202-368-1169 (or another staff member as directed in weekly communications).

For the parents/guardians: All necessary forms must be received prior to a student participating in a session.

We have read the guidelines and agree to follow them.					
Parent or Guardian	Student	 Date			



Student Information and Release Form



(Please print clearly)

Student Name:		Birthdate:		
Grade (circle): 6 7 or 8	Sex (circle):	Male	Female	Non-binary
Parent or Guardian Name(s)				
Parent Phone(s)				
Address				
City	State		Zip	
School	Parent E-mail			
Health Insurance Carrier			D#	
In case of emergency, notify:				
Name	Relationship			
Check here if same as above ()				
Phone				
Address	City		State	Zip
In order for SEA staff to work effectively wit be challenging for them. Please check the f Check all that apply and explain below.			-	=
Relating to other students				
Relating to adults				
Keeping temper under control				
Understanding and following directions				
Communicating effectively with others				
Other:				
Please explain any area(s) that you checked	d above:			

Is there anything about how your child learns that would be helpful for us to know in working with him/her? (For example, "My child has some difficulty with reading (or writing) and may need some assistance." Or "My child learns best by....")

Note: A guardian may be asked to join the participating student in some cases where there are significant behavior challenges or special needs present.

Parents/guardians – please read, complete, and sign the following:								
I,, parent/guardian of,								
I,								
								I also give permission for AWS and/or its representatives to send me messages about programs and activities sponsored by the organization and/or its partners at the email address supplied. I understand that AWS will never sell, or rent my personal information without my advanced consent. I also understand that I will always have the option to stop receiving email messages from AWS at any time and under any circumstances.
								Signature of parent/guardian Date
Prompt pick-up of students at dismissal is expected. Please read the following statement and sign IF you grant permission: "My child has permission to wait outside of the SEA meeting place alone after dismissal if I am late and she/he/they may take public transportation and/or walk to and from the SEA meeting place."								
(please sign here only if permission granted)								
To help us effectively recruit students, please tell us how learned about SEA: a) Listserv (which?):								
a) Listserv (which?):b) School Representative (who?):								
c) Friend/colleague (who?):								
d) Website or Facebook:								
e) Other:								



Medical History Form



*ALL ITEMS MUST BE FILLED OUT BY A PARENT/GUARDIAN. NO ONE WILL BE ALLOWED TO PARTICIPATE IN THE AWS' SATURDAY ENVIRONMENTAL ACADEMY WITHOUT A COMPLETED FORM ON FILE.

Name: Par	ent/Guardian Signature:				
General Questions (You MUST explain "yes" answers below)					
Has/does the participant:		Yes	No		
1. Had any recent injury, illness or infectiou	ıs disease?				
2. Have a chronic or recurring illness/cond	ition?				
3. Take medication (prescribed or over the	counter)?				
4. Ever been hospitalized?					
5. Ever had surgery?					
6. Have any emergency allergic reactions (e.g., bee stings, food, etc.)?				
7. Have frequent headaches?					
8. Ever had head injury?					
9. Ever been knocked unconscious?					
10. Ever had frequent ear infections?					
11. Ever passed out during or after exercise	??				
12. Ever had seizures?					
13. Ever had chest pain during or after exer	cise?				
14. Ever had high blood pressure?					
15. Ever been diagnosed with a heart murn conditions?	nur, or other heart				
16. Ever had back problems?					
17. Ever had problems with joints (e.g., kne	es. ankles. etc.)?				
18. Have any skin problems (e.g., itching, ra					
19. Have diabetes?	, ,				
20. Have asthma?					
20 a. If yes, does the child carry an inhaler	?				
21. Had mononucleosis in the past 12 mon					
22. Had problems with diarrhea/constipation					
23. If female, have an abnormal menstrual	history?				
24. Have a history of bed-wetting?					
25. Have any dietary restrictions (e.g., seafo	ood, pork, vegetarian, etc.)?				
26. Have problems with sleepwalking?					
Please explain any "Yes" answers, noting th	e number of the questions. Us	e the bacl	k if needed.		

Health History for	(write student's name) continued:					
Complete the following:						
A) During SEA's Saturday sessions, I authorize an Anacadminister the following over-the-counter medications of stomach ache, allergic reaction, etc.) to the participant. TylenolIbuprofenPepto BismolAnti-diarrheaBenadrylCough dropsOther:	or generic equivalent (i.e. for a headache,					
B) Are there any specific activities to be encouraged, limited or avoided? yes or no (circle)						
If yes, please explain:						
C) Does the participant have a current tetanus shot?	yes or no Date of shot://					
D) Please provide any other important health related information about your child:						
Please read and sign the following:						
This health history provided in this document is correct as far as I know.						
Parent or guardian signature	Date					

Submitting Application

Please scan and email to: Catherine Estes, SEA Program Director, at cestes@anacostiaws.org
Reach out if you need an alternate way to submit the forms.