

Parents/Student Information Package



Administered by
Central Avenue Betterment Association
913-281-9222



Funded in part by a grant from your Board of Public Utilities

Central Avenue Betterment Association
1621 Central Avenue
Mail: P.O. Box 171262, Kansas City, Kansas 66117



To Prospective Summer Mentoring Program participant and parent(s):

Attached is your packet of information and blank forms that serves as your invitation to be involved in a program funded in part by your Board of Public Utilities. Upon your completion of your assigned, agreed upon tasks and active involvement, the program will be financially rewarding and an experience for future personal success.

Cover the following with your parent:

- Read, understand and sign Rules Page No. 2
- Fully complete Application Page No. 3
- Deliver your registration form immediately and meet with a mentor

At that meeting you and a parent will be interviewed during which the program will be fully explained.

A few things to be considered before you proceed:

- You *must* live within the C.A.B.A. area
 - I-635 HWY to the West
 - State Line Rd to the East (West Bottoms)
 - Minnesota Ave. to the North
 - I-70 HWY to the South
- You should be a High School Student
- C.A.B.A. will plan and detail for you and your parent a curriculum, assignments and expectations
- All agreed to hours must be satisfactorily completed for Certificate and \$tipend to be awarded

Call 913.281.9222 with your questions or for clarification of application.

Thank You!

Edgar Galicia
Executive Director
Office 913.281.9222
Mobile 954.699.5853

C.A.B.A.'s Summer Mentoring Program!

Each year C.A.B.A. sponsors a mentoring program funded in part by a **Board of Public Utilities** Grant. This summer's program is designed for Area High School Students who are currently between 14 to 17 years old. This program:

- ❖ Provides high school students with mentors and situational experiences plus good work practices designed to prepare and to focus the student on personal career successes.
- ❖ Builds self esteem giving young persons the inner strength to resist negative peer pressure.
- ❖ Gives the community positive student/resident/business/leaders interaction.
- ❖ Provides actual situational and work experiences generating future career success paths.
- ❖ **Pays a stipend after completion of the Program.**

If you are interested in working with the C.A.B.A. Mentoring Summer Program! Please fill out the application in this package. The program is open to Central Avenue Area High School Students.

Edgar Galicia, Executive Director.

Rules and Procedures:

1. Student must be a permanent resident or student within the following area:
I-635 HWY to the West
State Line Rd to the East (west bottoms)
Minnesota Ave. to the North
I-70 HWY to the South
2. Student participant will complete and submit an acceptable application.
3. Student and parent/guardian will agree with these rules and sign consent forms (provided).
4. Student will be responsible for their own transportation to and from activities and events unless otherwise provided.
5. The student will follow agreed-upon curriculum and schedule. **NO EXCEPTIONS!**
6. Participant will show good faith with program director by satisfactorily contributing at activities and events and being at assigned location promptly each assigned day.
7. The program director will set the time according to agreed-upon curriculum and schedule.
8. Program will be produced during the months of June and July. Students must complete 85% or more of the program hours.
9. Will follow all rules regarding dress, substance abuse, safety, etc. of program.
10. Program hours are not accounted for community service hours. CABA will provide the participants with additional opportunities for volunteering service hours

I have read and fully understand the above rules and procedures of the Summer Student's Program and agree to comply with those set forth. If I had questions, they were satisfactorily answered. I understand I will actively participate in the full agreed upon hours, satisfy the program manager and perform the requisite duties to receive my reward at the closing of program.

Sign here _____ Date: _____
(Signature of Student Applicant)

Parent or legal guardian _____ Date: _____

C.A.B.A's Summer Mentoring Program Application

Central Avenue Betterment Association

Office: 1621 Central Avenue Mail: P.O. Box 171262, KCK 66117 Phone: 913-281-9222

Email: 1621Central@gmail.com

All applicants will be considered without regard to race, color, creed, religion, national origin, sex, or handicap.
(Please make your application as neat and as complete as possible, leave no space blank)

My full name _____ My email _____

Address where I live _____ K C, KS Zip _____

My Home Phone ___ - ___ - _____ My Cell Phone ___ - ___ - _____ (circle the best contact #)

Father's Name _____ Mother's Name _____

Parent's Address (if different than mine) _____

Other phones: Father's ___ - ___ - _____ Mother's ___ - ___ - _____

I have previously participated in a BPU sponsored summer program? No _____ Yes _____ Year: _____

In the event of an Emergency, please notify: _____

Address _____ City/St/Zip _____

Above person's Emergency Contact Phone Nos:

(home) ___ - ___ - _____ (wk) ___ - ___ - _____ (cell) ___ - ___ - _____

I am currently a Junior in good standing at (school): _____ Yes _____ No

I am experienced with the following:

1. ___ food preparation, serving
2. ___ computer
3. ___ janitorial/cleaning
4. ___ child care
5. ___ office environment
6. ___ other (explain) _____

Complete this statement: "When it is my choice, I spend my time . . . "

I have truthfully completed this application to the best of my ability. I have read and agree to comply with the rules/procedures of the Summer Mentoring Program (attached). I will comply with program director's rules/directions; I will participate in at least 48 of the 60 program hours to earn the stipend. I agree there is *no* partial payment.

Sign here _____ Date: _____
(Signature of Student Applicant)

Witness _____ Date: _____

-----Do not write below this line-----

CABA notes:

**C.A.B.A.'s Summer Mentoring Program
General Release**

FOR GOOD CONSIDERATION, the undersigned jointly and severally hereby forever release, discharge, acquit and forgive Central Avenue Betterment Association, Board of Public Utilities, Unified Government of Wyandotte County/Kansas City, Kansas, and program director(s) from any and all claims, actions, suits, demands, agreements, and each of them, if more than one, liabilities, judgments, and proceedings both at law and in equity arising from the beginning of time to the date of these presence and as more particularly related to or arriving from any injury, now and in the future, physical or mental, death, dismemberment. I understand my son/daughter will, in some cases, be transported via automobile to the location of activities/events and work locations.

This release shall be binding upon and inure to the benefit of the parties, their successors, assigns and personal representatives.

Signed this ____ day of _____, 20 ____

In the presence of:

Releaser/Student

Releaser/Parent or Guardian