



The Native American Fish and Wildlife Society (NAFWS) is proud to announce our 2024 NAFWS National Summer Youth Practicum (SYP) will be having an in-person session this year.

Are you an incoming 10th – 12th grader or do you know of someone that will be in the 10th – 12th grade that is interested in learning more about: Natural Resources? Wildlife? Recreation? Fish? Rivers? Traditional Ecological Knowledge? Conservation Law Enforcement? Forestry? Watershed? Tribal Lands? OR the preservation, protection, conservation, enhancement of natural resources? Then, the SYP is for YOU! Please Apply!



DATE: July 21, 2024 – July 28, 2024



LOCATION: Multiple Locations through Northern CO - Colorado State University Mountain Campus, Estes Park and Denver



COST: FREE! Food, Travel and Lodging expenses covered.



APPLICATION DEADLINE: April 26, 2024 by 10 pm Mountain Time

The practicum is designed to provide Native American students (10th – 12th grade) an opportunity to gain hands-on and in-lecture experience in the interdisciplinary components of natural resource management and Indigenous knowledge. One of the goals of the Society is to educate Native American youth to understand the importance of professional natural resource management and the interconnectedness to culture, as well as encourage them to continue their education and pursue careers in the natural resource fields.

NAFWS Education Coordinator will be hosting an informational webinar on the application process and program:

Friday, February 16, 2024 at 6:00 pm Mountain Time on Zoom

Friday, March 15, 2024 at 6:00 pm Mountain Time on Zoom

For more information contact AND/OR to send complete applications to:

Ashley Mueller, NAFWS Education Coordinator

Website: nafws.org | **Email:** amueller@nafws.org | **Office Phone:** (720) 983-1010 Ext. 203 **Mobile:** (505) 862-3779



CHECKLIST

Make sure you submit the following materials and that they are all completed:

- Completed *Application for Admission*
- Creative Submission for Admission
- Student Emergency and Health Form & Media Release Statement*. Please review, complete and sign.
- Student Contract*. Please review and sign.
- Parent/Guardian Contract*. Please review and sign.
- COVID-19 Protocols for 2024 National Summer Youth Practicum: Acknowledgment and Agreement*. Please review and sign.
- NAFWS Liability Waiver and General Release for Summer Youth Practicum Relating to Coronavirus/COVID-19*. Please review and sign
- 1 Letter of Recommendation: To be submitted by your recommender by email. Student or student parent/guardian are not allowed to submit letter.

APPLICATION CLOSING DATE IS April 26, 2024 by 10 pm Mountain Time. PLEASE MAKE SURE THAT YOUR APPLICATION IS COMPLETE AND SUBMITTED BY EMAIL. EMAIL COMPLETE APPLICATION TO: amueller@nafws.org



APPLICATION FOR ADMISSION

STUDENT'S FULL LEGAL NAME: _____

STUDENT'S ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

BIRTH DATE: _____ AGE: _____ GENDER: _____ PRONOUNS (OPTIONAL): _____

STUDENT'S PHONE: _____ STUDENT'S EMAIL: _____

WE ENCOURAGE STUDENTS/PARENTS/GUARDIANS TO BE PART OF THE COMMUNICATION THROUGHOUT THE PROGRAM

SCHOOL: _____ GRADE (UPCOMING FALL): _____

TRIBAL AFFILIATION: _____ ENROLLMENT # (IF AVAILABLE): _____

NAME & PHONE OF PARENT OR GUARDIAN: _____

EMAIL OF PARENT OR GUARDIAN: _____

T-SHIRT SIZE (CIRCLE):

XS S M L XL XXL XXXL

***** STUDENT MUST BE IN GOOD PHYSICAL CONDITION AS PHYSICAL ACTIVITIES ARE PART OF PRACTICUM *****

SHOE SIZE: _____, WOMEN SIZE MEN SIZE HEIGHT (ft, inch): _____ WEIGHT (lbs): _____

(This will help us pair waders and wader boots for our Fisheries Day)

SELECT CREATIVE SUBMISSION FOR ADMISSION OPTION (SEE NEXT PAGE FOR INFO):

OPTION 1: ESSAY

OPTION 2: VIDEO

OPTION 3: ARTWORK

YOUR CREATIVE SUBMISSION MUST ANSWER THESE CREATIVE SUBMISSION PROMPTS:

1. Tell us about yourself, your family, hobbies, favorite outdoor activities, etc.
2. Share your interests, jobs and/or activities regarding natural resources such as outdoor recreation, fisheries, wildlife, forestry, range management, watershed, conservation management and Traditional Ecological Knowledge?
3. What do you think is natural resource conservation? Why is it important? How does it connect to your culture, language and/or traditions?
4. What is your opinion of natural resource management on your reservation or community? How would you improve it?

HOW DID YOU HEAR ABOUT AND GET THIS APPLICATION? (SCHOOL, TRIBAL NATURAL RESOURCE DEPT., WEBSITE, FACEBOOK, NAFWS MEMBER, FRIEND, PARENT, EMAIL, POSTED, ETC): _____

CREATIVE SUBMISSION FOR ADMISSION: INSTRUCTIONS & INFORMATION

The NAFWS is incorporating a new idea of implementing a creative submission to allow student applicants to better express their interests in the 2024 NAFWS National Summer Youth Practicum. We hope that through this application process, that it will be more fun, inspiring, unique and motivating for student applicants to apply, express their interests, and exercise their creativity.

We encourage student applicants to step out of their comfort zones and use their imagination, creativity, and Indigenous minds to submit a beautiful creative submission. Selection committee will base their selections on student's efforts and answers to the 4 prompts (see page 3). The creative submission options are below:

OPTION 1: ESSAY

You may submit an essay that is 250 – 500 words (maximum). Your essay can include or be a poem, a story, song lyrics, Native language (with English translation), wordle and etc., as long as it addresses the four creative submission prompts. Essay can be typed or handwritten, please use eligible font(s).

Submission for Essay:

- Submit your essay as an email attachment with completed *Application for Admission* and documents (refer to checklist on Page 2)

OPTION 2: VIDEO

You may create a video of yourself that must be 2 - 3 minutes long. Your video can include or be you reciting a poem, telling a story, singing a song, interpretive dance, include Native language (with English translation) and etc., as long as it addresses the four creative submission prompts. Ensure that song choice for singing, overlaying in video and/or dancing are appropriate (no foul language).

Submission Options for Video:

- Option 1: Tag us in your video caption. You can tag us on Facebook, Instagram, TikTok and/or YouTube. See social media handles on Page 5 (next page).
- Option 2: Email your video or a link to the education coordinator.

OPTION 3: ARTWORK

You may submit a painting, drawing, sculpture or collage that you created. If you do the artwork option, you must also submit a 250 word (max) explanation (can be bullet points). This is to ensure that we are interpreting your answers correctly, and that it addresses the four creative submission prompts.

Submission Options for Artwork:

- Option 1: Send by mail with completed *Application for Admission* and Important & Vital Documents (5 total documents).

Mailing Address: 10645 Melody Dr. Ste. 307 Northglenn, CO 80234

- Option 2: Scan or take a good quality photo of your artwork and attach to an email with your completed *Application for Admission* and documents (refer to checklist on Page 2)
- Option 3: Email digital artwork to the education coordinator with your completed *Application for Admission* and documents (refer to checklist on Page 2)

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nafws.org



[@nativeamericanfishandwildlifesociety](https://www.facebook.com/nativeamericanfishandwildlifesociety)



[@nafws_insta](https://www.instagram.com/nafws_insta)



[@nafwstiktok](https://www.tiktok.com/@nafwstiktok)



[@native_wildlife](https://twitter.com/native_wildlife)



[Native American Fish & Wildlife Society](https://www.linkedin.com/company/native-american-fish-and-wildlife-society)



[nativeamericanfishandwildlifesociety](https://www.youtube.com/nativeamericanfishandwildlifesociety)



STUDENT EMERGENCY & HEALTH FORM

(To be filled out by parent or guardian)

STUDENT NAME: _____ PHONE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____

PARENT/GUARDIAN NAME: _____

WORK PHONE: _____ MOBILE PHONE: _____ EMAIL: _____

****Please submit phone numbers and emails that are in service & that are checked frequently****

EMERGENCY CONTACT 1: (IF SAME AS PARENT/GUARDIAN LEAVE "EMERGENCY CONTACT 1 BLANK", FILL OUT EMERGENCY CONTACT 2)

NAME: _____ PHONE: _____ RELATIONSHIP: _____

EMERGENCY CONTACT 2:

NAME: _____ PHONE: _____ RELATIONSHIP: _____

PHYSICIAN NAME & ADDRESS: _____

PHONE: _____ MEDICAL COVERAGE: _____

IS YOUR CHILD ELIGIBLE FOR CONTRACT HEALTH CARE COVERAGE FROM INDIAN HEALTH SERVICE (IHS): YES NO

IHS CLINIC NAME, LOCATION, PHONE: _____

HAS YOUR CHILD RECEIVED THEIR COVID-19 VACCINATION? IF YES, PLEASE STATE TYPE OF VACCINE (I.E. MODERNA) AND DATE RECEIVED OF DOSE(S): _____

***** IF YOUR CHILD HAS NOT RECEIVED THEIR COVID-19 VACCINATION, NAFWS WILL REQUIRE A NEGATIVE COVID-19 TEST 48 HOURS PRIOR TO THEIR DEPARTURE TO THE NATIONAL SYP. *****

DOES YOUR CHILD HAVE ANY PHYSICAL DISABILITIES? (EXPLAIN): _____

DOES YOUR CHILD WEAR GLASSES AND/OR CONTACT LENSES: YES NO

DIETARY RESTRICTIONS OR ALLERGIES: _____

ALLERGIES (HAY, ANIMALS, BITES, STINGS, FOOD, DRINKS, MEDICATION) (EXPLAIN): _____

_____ ASTHMA? _____

HAS YOUR CHILD HAD ANY MAJOR ILLNESSES IN THE PAST 5 YEARS? _____

IS YOUR CHILD CURRENTLY TAKING ANY MEDICATION(S)? _____

DOES YOUR CHILD REQUIRE ANY SPECIAL (EMERGENCY) MEDICATION? _____

PLEASE LIST ANY OTHER INFORMATION WHICH YOU FEEL IS IMPORTANT:

MEDIA RELEASE STATEMENT

I, _____ PARENT OR GUARDIAN, OF _____
give permission for Native American Fish & Wildlife Society and partnering organizations of the National SYP to take pictures, videos, of my student which may be shared with partnering organizations and/or used in newspapers, television, magazine articles, websites, NAFWS social media pages (Twitter, Facebook, Instagram), LinkedIn, YouTube, TikTok, etc.), documentations, presentations and talks concerning the National SYP and NAFWS without compensation.

Parent or Guardian, I have read, understand, and accept all the conditions above:

Name of Parent (Printed): _____

Signature of Parent or Guardian: _____ Date: _____



STUDENT CONTRACT

Acceptance to the 2024 National Summer Youth Practicum is an opportunity and privilege. To ensure a safe, fun and learning environment, we request students and parents/guardians to assume certain responsibilities.

STUDENT: I, _____, as part of the 2024 National Summer Youth Practicum accept the conditions stipulated below:

1. I will participate in and be on time to all session and activities, unless excused by a staff member.
2. I will conduct myself in an appropriate manner and be respectful and courteous as a representative of my Tribe.
3. I will sleep where assigned and realize that I may be roommates with students I have never met.
4. I understand that no one is allowed outside of sleeping quarters after 10:00 pm and that all lights must be out by 10:30 pm and that there will be a bed check every night by a chaperone. I understand that there must be quiet time between 10:30 pm and 6:30 am.
5. I will not use, bring or attain drugs or alcohol during the National SYP and I understand that by doing this, I will be sent home AT MY PARENTS'/GUARDIANS' EXPENSE.
6. I understand that I may be held responsible for any damage to National SYP equipment or facilities due to negligence, recklessness or destructive behavior.
7. I understand that no water balloons, firework, lighters, or fire matches will be allowed.
8. I understand that NAFWS is not responsible for any loss or stolen items.
9. I understand that there will be no smoking nor vaping allowed, tobacco is allowable for Traditional purposes only (as approved by staff member).
10. I understand that foul language and/or cursing will not be tolerated.
11. I understand that during National SYP sessions and activities, I will not wear (i.e. earphones hanging from shirt collar) any headphones, earphones, and/or air pods, UNLESS given permission by staff.
12. I understand that no visitations from family, friends, etc. is allowed during the entirety of the program. If parents/guardians want to pick up or drop off student at the program, pre-arrangements must be made.
13. I understand that bullying and/or hazing (physical, verbal, emotional, sexual, mental) is not acceptable. I understand that by doing this, I will be sent home AT MY PARENTS'/GUARDIANS' EXPENSE.
14. I will adhere to these and all other rules of the National SYP including COVID-19 guidelines and Colorado State University Mountain Campus and YMCA of the Rockies.
15. I release and waive my right to bring any claims I may have against the NAFWS and their officials, employees and agents for personal injury or property damage due to my participation in the 2024 National Summer Youth Practicum.

Student, I have read, understand, and accept all the conditions above:

Signature of Student: _____ Date: _____

Parent or Guardian, I have read, understand, and accept all the conditions above and overviewed them with student:

Signature of Parent or Guardian: _____ Date: _____



PARENT/GUARDIAN CONTRACT

(To be filled out by parent or guardian)

PARENT/GUARDIAN: I have read, understand, and agree with the following terms. Permission is given for my child to participate in all activities and events, and for my child to receive all necessary medical attention should the need arise, with the understanding that I will be contacted immediately. Furthermore:

1. I understand that the Native American Fish & Wildlife Society (NAFWS) or the chaperones will not be responsible for any theft, injury, or illness where my child is concerned.
2. I give permission for any chaperone or staff member to render first aid, if necessary.
3. I give my consent and permission for hospital staff to treat my child if needed in the case of an emergency, with the understanding that I will be contacted immediately.
4. I understand that the youth will be chaperoned responsibly, and every effort will be made to ensure a safe and enjoyable experience.
5. I understand that drugs or alcohol use are NOT permitted and that if my child is caught under the influence, I will pick him/her/them up immediately AT MY OWN EXPENSE.
6. I understand that bullying and/or hazing is NOT permitted and that if my child is caught bullying and/or hazing, I will pick him/her/them up immediately AT MY OWN EXPENSE.
7. I understand that as part of my child's application, the STUDENT EMERGENCY INFORMATION FORM is required to be completed and will be on file.
8. I understand that if my child withdrawal's their participation within fourteen days prior to travel date, I will be responsible for returning travel costs that were sent by check. Further, I may be responsible for returning the travel costs that are associated with the purchased airfare ticket.
9. I understand that if my child is not vaccinated, my child must have a negative COVID-19 test 48 hours prior to their departure for the National SYP including submitting a negative COVID-19 form to the NAFWS.
10. I release and waive any claims I may have against the NAFWS and their officials, employees and agents for personal injury or property damage due to my child's participation in the 2024 National Summer Youth Practicum.

Name of Parent or Guardian (Printed): _____

Signature of Parent or Guardian: _____ Date: _____



COVID-19 PROTOCOLS FOR 2024 NATIONAL SUMMER YOUTH PRACTICUM

The 2024 National Summer Youth Practicum (National SYP) is being planned for an in-person session for Sunday, July 21 – Sundays, July 28, 2024 at multiple locations (Colorado State University Mountain Campus, Estes Park, Denver) . We are looking forward to engaging with Native high school students, exploring the natural resources fields and enjoying the great Rocky Mountains alongside our wonderful National SYP staff.

With the uncertainties and concerns regarding COVID-19 and for the safety of the National SYP participants, staff, and instructors, we have constructed a COVID-19 Protocol. Decisions and operation of the National SYP will be based on state, federal and host orders and COVID-19 guidelines. This may cause the National SYP to run differently, but we did our best in developing our COVID-19 Protocols for the 2024 National Summer Youth Practicum and may be subject to change depending on new developments, recommendations, and health orders, this is not excluding the possibility of cancelling the in-person session at any time.

The NAFWS is working hard to ensure that the students and staff are safe while having a fun, enjoyable, and learning experience.

PARTICIPANT AND STAFF SAFETY GUIDELINES AND PRACTICES

PRIOR TO THE NATIONAL SYP (BEFORE SUNDAY, JULY 21, 2024)

- NAFWS will provide students/staff with appropriate personal protective equipment (PPE) such as masks and hand sanitizer, if needed/requested
- Highly encouraging and [requiring our counselors](#) and instructors to receive their COVID-19 vaccination (s) prior to the National SYP
- Highly and strongly encouraging our SYP students to receive their COVID-19 vaccination prior to their participation in the National SYP
- Requesting staff and student's information regarding COVID-19 vaccinations
- Students and counselor staff, who are not fully vaccinated, are required to submit a negative COVID-19 test 48 hours prior to their departure for the National SYP. NAFWS will send a form, for students and instructors to fill and submit.
- Parents/Guardians will have to review and sign a NAFWS COVID-19 Liability form.

DURING THE NATIONAL SYP (SUNDAY, JULY 21– SUNDAY, JULY 28, 2024)

LODGING & CLASSROOM

- Counselors will sanitize all the rooms prior to student's arrival
- Since students will be **required** to have a negative COVID-19 test prior to the National SYP or have received their COVID-19 vaccination, students will lodge together

- Students and staff will follow mask guidelines set by visiting locations and host site (per CDC guidelines)
- Students will be highly encouraged to wash and/or sanitize their hands regularly
- Students will be kept in minimal contact with other guests and groups
- Sanitation of classroom and equipment, before and after use with CDC recommended cleaning and sanitation materials

FOOD & DINING

- The CSU Mountain Campus and YMCA of the Rockies have dining halls that is open daily which is where we will be having our meals. In-sitting dining is currently open.

IF A STUDENT OR STAFF, STARTS TO FEEL COVID19-LIKE SYMPTOMS AT THE NATIONAL SYP

- We will follow the [State of Colorado guidelines for Cases and Outbreaks in Child Care and Schools](#) as best as we can.
- If a student or staff starts to show COVID-19 symptoms, we will provide an at-home COVID-19 test.
- If student or staff receives a positive COVID-19 test, the student or staff will immediately be quarantined in their room while awaiting results and if test is positive. Student’s parents/guardians will be notified. Staff will check on student or staff, consistently throughout quarantine, while keeping themselves safe (i.e. possibly talking through the door or calling their cell phone).
 - If symptoms, are resolved within 24 hours, student/staff will be allowed to be out of quarantined based on the “[Return to Learn](#)” tool.
 - If symptoms worsen or do not resolve, student’s parents/guardians will be notified. NAFWS will prepare student to remain in quarantine, travel home and/or visit the local hospital.

ACKNOWLEDGE AND AGREEMENT

Student, I have read, understand and accept all the conditions above:

Name of Student: _____

Signature of Student: _____ Date: _____

Parent or Guardian, I have read, understand and accept all the conditions above and overviewed them with student:

Name of Parent: _____

Signature of Parent: _____ Date: _____

FOR MORE COVID-19 INFORMATION:

CENTER OF DISEASE CONTROL (CDC)

<https://www.cdc.gov/>

<https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/summer-camps.html>

<https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/adolescents.html>

STATE OF COLORADO

<https://covid19.colorado.gov/for-coloradans>

NAFWS LIABILITY WAIVER AND GENERAL RELEASE
FOR SUMMER YOUTH PRACTICUM RELATING TO CORONAVIRUS/COVID-19

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. COVID-19 is contagious. The state of medical knowledge is evolving, but the virus is believed to spread from person-to-person contact, by contact with contaminated surfaces and objects, and in the air. People reportedly can be infected and show no symptoms and therefore spread the disease. The exact methods of spread and contraction are unknown. Evidence has shown the COVID-19 can cause serious and potentially life-threatening illness and death. Even with social distancing, mask-wearing and development of vaccines, new and emerging variants of COVID-19 may increase risk of transmission and/or mortality.

The Native American Fish and Wildlife Society (NAFWS), which conducts the Summer Youth Practicum (SYP), including each of their affiliates, members, employees, officers, instructors, aides, and/or agents (the “Released Parties”) cannot prevent you from becoming exposed to, contracting, or spreading COVID-19 while participating in the SYP. While the NAFWS will require all SYP participants and staff to have either received their COVID-19 vaccination or to have a negative COVID-19 test result within 48 hours of their departure for the SYP, it is not possible to prevent against the presence of the disease. Therefore, if you choose to participate in the SYP, you may be exposing yourself to and/or increasing your risk of contracting or spreading COVID-19.

ASSUMPTION OF RISK: I have read and understand the above warning concerning COVID-19. I hereby choose to accept the risk of contracting COVID-19 for myself, and for my family members or others who I may expose, in order to participate in the SYP. These services are of such value to me that I accept the risk of being exposed to, contracting, and/or spreading COVID-19 in order to participate in the SYP.

WAIVER OF LAWSUIT/LIABILITY: I hereby forever release and waive my right to bring suit against the Released Parties in connection with exposure, infection, and/or spread of COVID-19 related to my participation in the SYP. I understand that this waiver means I give up my right to bring any claims including for personal injuries, death, disease or property losses, or any other loss, including but not limited to claims if negligence, and give up any claim I may have to seek damages, whether known or unknown, foreseen or unforeseen.

OTHER TERMS: I fully understand and agree that (a) this Release is intended to be as broad and inclusive as permitted by the laws of the State of Colorado; (b) if any portion of this Agreement is for any reason held invalid or legally unenforceable, then the balance shall, notwithstanding, continue in full force and legal effect; and (c) I have had the opportunity to ask questions about this Agreement and I fully understand its terms and meaning.

I HAVE CAREFULLY READ AND FULLY UNDERSTAND ALL PROVISIONS OF THIS WAIVER AND GENERAL RELEASE, AND FREELY AND KNOWINGLY ASSUME THE RISK AND WAIVE MY RIGHTS CONCERNING LIABILITY AS DESCRIBED ABOVE;

Signature: _____

Date: _____

Name (printed): _____

I am the parent or legal guardian of the minor named above. I have the legal right to consent to and, by signing below, I hereby do consent to the terms and conditions of this Waiver and General Release.

Signature: _____

Date: _____

Name (printed) _____