



Application Contents and Required Forms List

The complete 2016 Eewansaapita packet contains several forms and letters. Some are directed to parents/guardians and some are directed to youth applicants. They are separated into two lists below.

- Please read all pages carefully and sign and date accordingly.
- Each page that needs to be returned has a border with **SIGN AND RETURN THIS PAGE** written at the bottom. These are also in bold with an asterisk in the list below.
- One item (Youth Performance Contract: Code of Conduct) **NEEDS BOTH** parent and youth signatures. It is in bold with an asterisk and underlined below.

For Youths:

- Youth Letter
- **Youth Application & Essay*** (2 pages)
- **Youth Performance Contract:
Code of Conduct***

For Parents:

- Parent Letter
- **Youth Profile and Parent Permission***
- **Youth Performance Contract:
Code of Conduct***
- **Youth Medical Permission***
- **Health and Medical Waiver***
- **Over-the-Counter Medications***

MAIL ALL MATERIALS TO:

Miami Tribe of Oklahoma
Myaamia Education Office
Eewansaapita Summer Educational Experience
P.O. Box 1326
Miami, OK 74355
Attn: Gloria Steed

DUE DATE FOR APPLICATIONS IS MAY 11, 2016



Kiihkayonki (Fort Wayne, Indiana)

Aya myaamiinse (Hello Myaamia Youth),

The plans for the 2016 **Eewansaapita Kiihkayonki (Fort Wayne, Indiana) Summer Educational Experience** are almost finished and include many new and exciting activities. This summer youth gathering allows us opportunities to learn and play traditional games, create traditional works of art, speak our Myaamia language and learn about our Tribal history while spending time together and having fun getting to know each other!

This year's theme is **Weekihkaanki Meehkintiinki (Myaamia Games)**. Our 2016 program will be a five-day camp beginning Monday, July 11 and ending Friday, July 15. Sessions will run from 9 a.m. to 4:30 p.m. each day. We are looking for a group of up to 25 eager and enthusiastic participants. This online packet has everything you need to apply.

Eewansaapita Kiihkayonki (Fort Wayne, Indiana) July 11–15, 2016

TO APPLY: YOU MUST BE 10 YEARS OLD BEFORE JULY 11.
YOU MUST STILL BE SIXTEEN YEARS OLD ON JULY 15.

Application Deadline is May 11, 2016

If you are interested in attending **Eewansaapita Kiihkayonki** this year, please tell your parent/guardian and have them help you download and fill out all the necessary pages of this application. Many of the pages need to be signed by you and/or your parent or guardian. Those pages are outlined with a border and written at the bottom of each page is SIGN AND RETURN THIS PAGE.

If you are thinking about applying, don't wait! It's very important to return your application by the **deadline of May 11, 2016**. If you have questions about the camp please have your parents call me any time during the day at (918) 541-1322. We look forward to spending time, having fun and learning with you!

kapootwe kati neeyolaanki (see you soon),

Gloria Steed
Myaamia Education Officer



YOUTH APPLICATION AND ESSAY

Youth Name

Age

Current Grade Level

Gender (M/F)

Circle each year of other Eewansaapita camps you have attended. (There was no camp in 2010.)

2015

2014

2013

2012

2011

2009

2008

Youth T-Shirt Size: Youth Size ___ S ___ M ___ L Adult Size ___ S ___ M ___ L ___ XL ___ XXL

Each youth applying is asked to write an essay to complete the application. The essay is important! Please take time to organize your thoughts clearly before you begin writing. The thoughtfulness and quality of the essay will be considered as participants are selected for the Eewansaapita program. Use the following page to write your response.

If this is your first Eewansaapita experience please respond to essay prompt number 1.

- 1) You will learn a lot of Myaamia language and culture during your five days at the Eewansaapita Summer Educational Experience. How do you feel about having the opportunity to learn these things and what do you hope to do with what you learn?

If you are a returning student please respond to essay prompt number 2.

- 2) Tell us some of the things you have learned from other Eewansaapita experiences. How did you share that learning with others?



YOUTH APPLICATION AND ESSAY

Name

Date



Youth Performance Contract: CODE OF CONDUCT

I realize that my participation in the Eewansaapita Summer Educational Experience is contingent upon my commitment to honor the standards of conduct established by Eewansaapita directors for the benefit of fellow youth and myself. In this regard I make the following agreements:

Please read the following out loud to your parent/guardian. Once you are finished, ask your parent/guardian any questions that you may have. When you feel you understand the Code of Conduct, you and your parent/guardian sign at the bottom.

As a participant, I will:

- Show respect to other participants and treat them as well as I would like to be treated.
- Show respect to staff and cooperate fully with their instructions.
- Respect the rights and beliefs of others and treat others with courtesy and consideration.
- Communicate in an appropriate manner, which means I must not use foul language or gestures, harsh words or tone of voice.
- Conduct myself responsibly. I understand that horseplay, teasing, threats, and other unkind behaviors are not allowed.
- Refrain from deliberately causing bodily harm to other participants or staff. I understand that pushing, kicking, hitting or fighting are not acceptable and will not be tolerated.
- Use program equipment, supplies, and facilities properly.
- Respect the property of others.
- Refrain from riding in any vehicle during the five-day program, with the exception of vehicles driven by Eewansaapita staff or parent/guardian.
- Abstain from the use or possession of alcohol, drugs or tobacco.
- Be fully responsible for my actions and understand that irresponsible behavior will result in disciplinary action. Failure to keep any of my commitments will result in immediate suspension and/or not being invited to participate in future Eewansaapita programs.

Finally, I recognize that the staff has the right to establish other rules for student conduct and set appropriate penalties if they are broken. I pledge to do my best to adhere to the rules established by the staff, and respect the right of the staff to enforce those rules when necessary.

Youth: Did you read and understand the Code of Conduct? (check if yes) YES

Parent: Did your child read and understand the Code of Conduct? (check if yes) YES

Youth Signature

Date

Parent or Legal Guardian Signature

Date



Kiihkayonki (Fort Wayne, Indiana)

Dear Parent or Legal Guardian,

Welcome to the application packet for the 2016 **Eewansaapita Kiihkayonki** (Fort Wayne, Indiana) **Summer Educational Experience**. We are pleased to once again offer this quality cultural education experience to Tribal youth. Thank you for encouraging your son or daughter to consider joining us for the Oklahoma experience this year.

Below are the specific dates, daily beginning and ending times, age eligibility requirements, and application deadline date. We will offer a five-day camp again this year.

Eewansaapita Kiihkayonki (Fort Wayne, Indiana) **July 11–15, 2016**
The 2016 theme is **Weekihkaanki Meehkintiinki** (Myaamia Games).

This five-day format will have classes from 9 a.m. to 4:30 p.m.

TO APPLY: YOU MUST BE 10 YEARS OLD BEFORE JULY 11.
YOU MUST STILL BE SIXTEEN YEARS OLD ON JULY 15.

Application Deadline is May 11, 2016

We are pleased that the staff continues to be made up of long-term Tribal employees and dedicated Tribal members committed to perpetuating our shared identity by preparing a wonderful experience for your child. Leading the educational staff is George Ironstrack of the Myaamia Center at Miami University along with instructors Jessie Seddelmeyer, Tina Fox, and Greta Sirois, all certified teachers. If you have questions, concerns, or need to discuss any details with someone before applying, we encourage you to contact George or me. The contact information is provided at the end of this document.

This packet includes several pages, some directed to parents or guardians, and some directed to the Myaamia youth. Each page that needs to be returned has a border with SIGN AND RETURN THIS PAGE written at the bottom. Hopefully, this will help you keep track of which pages must be signed and returned.

There are two different packets online. Make certain you are using the packet of materials for the **Eewansaapita Kiihkayonki** (Fort Wayne, Indiana) camp. Some pages may have been changed from past years.

Once again your son or daughter is asked to write an essay in the application. Selection is based on the quality of responses to the essay as well as completeness of the required forms. Please keep the **application deadline of May 11, 2016** in mind and return the completed forms as quickly as possible.

We ask that you take the time to carefully discuss with your child the details in the **Performance Contract: Code of Conduct**. With your help and emphasis, all participants will better understand their responsibilities during this program.

We look forward to receiving your child's application. Don't hesitate to let us know if we can assist you in any other way.

kikwehsitoole (respectfully)

Gloria Steed
Myaamia Education Officer

Gloria Steed, Myaamia Education Officer, Phone: (918) 541-1322 Email: gsteed@miamination.com

George Ironstrack, Myaamia Center Asst. Director, Phone: (513) 529-5648 Email: ironstgm@miamioh.edu



YOUTH PROFILE AND PARENTAL PERMISSION

The 2016 Eewansaapita Summer Educational Experience will be held at Fox Island County Park and Nature Preserve in Fort Wayne, Indiana July 11-15. The level of success of this program depends upon the commitment that each student and his/her parents/guardians make as participating families. It is important for Myaamia youth to have access to their heritage language and culture if they are to develop a deeper relationship with their Myaamia community. Of equal importance are parents/guardians who value traditional language and culture and support their children's continued cultural learning within the home.

The following youth details are required:

_____	_____	_____	_____
Youth Name	Date of Birth		
_____	_____	_____	_____
Home Address	City	State	Zip

Youth Enrollment Number			

The following parent contact information is required:

_____	_____
Parent/Legal Guardian Name	E-mail
_____	_____
Home Phone #	Primary Cell #

Place a check of agreement for the following statements:

_____ I give permission for my child to participate in the Eewansaapita Summer Educational Experience day camp set for July 11-15, 2016 in Fort Wayne, Indiana and certify that, to the best of my knowledge, this application information is accurate.

_____ I understand that ongoing documentation of program activities occurs, including photos and video recordings, that will be used at the discretion of the Myaamia Education Office and the Myaamia Center at Miami University for reporting about the program, recruiting future participants, and for public education.

_____ I give permission for this application information about my child and my child's program generated material (such as pre/post questionnaires and selected creative/artistic materials) to be collected and stored in a tribal education database to be maintained by the Myaamia Education Office.

_____ I give my permission for application information about my child and my child's program generated material (such as pre/post questionnaires and selected creative/artistic materials) from **PAST** Eewansaapita Summer Education Programs to be collected and stored in a tribal educational database to be maintained by the Myaamia Education Office.

_____	_____
Parent or Legal Guardian Signature	Date



YOUTH MEDICAL PERMISSION

Doctors will NOT treat minors without written permission from parents/guardians. Therefore, it is necessary that the following statement be signed and in our files in case of a medical emergency. This form will be taken to the doctor/clinic/hospital should your child require medical attention.

I (parent/legal guardian), _____ recognize that while attending this program, medical treatment on an emergency basis may be necessary for my child (child's name) _____, and I further recognize that Eewansaapita Program Directors may be unable to contact me for my consent for emergency medical care. I do hereby consent in advance to such emergency care, including hospital care, as may be deemed necessary under the circumstances. I also waive the program from any financial responsibility resulting from illness or accident while attending the program as such costs will be covered by my personal medical insurance.

Parent or Legal Guardian Signature

Date

Insurance Provider

Policy Number



HEALTH AND MEDICAL WAIVER

I _____, the parent/legal guardian of
(youth name) _____, hereby warrant that my
child is physically fit and able to participate in the Eewansaapita Summer Educational Experience activities, and
consent to any employee, agent, or other personnel affiliated with the Eewansaapita Summer Educational
Experience to seek medical attention and treatment or other measures deemed necessary or advisable in the event
of an accident, sudden illness, or other condition that occurs while my child named above is in the care or under
the supervision of the Eewansaapita Program Directors, employees, counselors, or agents.

I, as parent/legal guardian, further understand that the Eewansaapita Program Directors will make reasonable
efforts to notify the parent/legal guardian in the case of an accident, sudden illness or other condition, but
authorize Eewansaapita Program Directors to seek such care or treatment, and for any care or treatment to be
administered, even in the event that either parent or legal guardian are not contacted prior to the seeking or
rendering of such care, treatment, or other measures.

I, as parent/legal guardian, signing this form release the Eewansaapita Program Directors, the Program personnel,
and the Miami Tribe of Oklahoma from any liability for such decisions or actions in seeking medical care, and
agree to pay all the costs and fees for the medical care or treatment authorized under this Health and Medical
Waiver.

I, as parent/legal guardian, agree to hold harmless the Eewansaapita Program Directors and personnel, and the
Miami Tribe of Oklahoma, from any claims, damages, losses and/or expenses arising out of participation in
camp activities and/or transportation, and to assume all liability for any and all personal injury, bodily injury,
illness or property damage that occurs as a result of participation in such camp activities.

I, as parent/legal guardian, also warrant that participation in this camp is voluntary and that my child and I, as
parent/legal guardian, understand the inherent risks involved in camp activities. I further state that my child
agrees to obey all rules and policies mandated by the camp personnel.

Parent or Legal Guardian Signature

Date

Print Name



OVER-THE-COUNTER MEDICATIONS

Eewansaapita Summer Educational Experience will have several over-the-counter medications available. However, in order to give a youth any over-the-counter medicine, parent/guardian permission is required. Parents/guardians bringing their child to camp each day will have the ability to meet with counselors and staff to discuss their child's medical/medication needs.

The following medications are available at Eewansaapita, if your child were to need them. Please place a check mark next to the medications below that you will ALLOW your child to have, if needed, while he or she is at Eewansaapita.

- Ibuprofen (pain reliever, fever reducer)
- Tylenol (pain reliever)
- Benadryl (allergies, sneezing, itching-watery eyes, allergic reaction)
- Pepto Bismol (upset stomach, heartburn)
- Antibiotic Ointment (prevents infection in cuts and scrapes)
- Cortizone Cream (stops itching in skin irritations)
- Petroleum Jelly (heals dry irritated skin)
- Muscle Rub (relieves muscle pain)
- Calamine Lotion (stops itching, dries poison ivy/poison oak)
- Cough Drops (coughing, sore throat)
- Aloe Vera Gel (relieves pain from sunburn)

I authorize Eewansaapita Program Directors to give the above checked over-the-counter medications to my child (child's name) _____ on an as needed basis.

Parent or Legal Guardian Signature

Date

List Youth Allergies: _____

Additional Comments: _____

