



## 2022 ZooCamp Scholarship Fund for Children with Autism Application

Thank you for your interest in applying for a scholarship through the ZooCamp Scholarship Fund for Children with Autism. This program is a collaborative effort of Paul V. Sherlock Center on Disabilities at Rhode Island College and Roger Williams Park Zoo with the objective to increase accessibility of summer ZooCamp to children on the autism spectrum while providing supports for success.

The 2022 ZooCamp Scholarship Fund for Children with Autism will provide six (6) full week scholarships to children ages 11 – 14 to attend our Conservation Heroes ZooCamp. A full-time Inclusion Specialist works with ZooCamp staff to integrate campers into an inclusive, curriculum based ZooCamp experience. This staff member supports all campers/staff and will not be able to provide consistent 1:1 support to any camper.

### CRITERIA:

- Applicants must be the designated ages at the time of camp and diagnosed with an autism spectrum disorder (ASD) (e.g., this would include ASD or specific diagnoses such as autism, Asperger Syndrome, PDD-NOS, etc.).
- Students that require a 1:1 aide at school are eligible to apply for a scholarship but must be accompanied to ZooCamp by a non-parent aide provided by the parent/guardian if awarded a scholarship.
- Transportation to and from Roger Williams Park Zoo must be provided by parents/guardians.
- Parents/guardians must participate in one (1) camp orientation session prior to their child's week at ZooCamp. At these sessions, campers will be given the opportunity to "check-in" for camp, receive their complimentary ZooCamp t-shirt, get their nametag, meet camp staff, and experience the camp classroom.
- Parents/guardians must agree to participate in pre/post surveys, data collection, and to provide details to ZooCamp staff regarding their child's IEP, behavior plans, and any other necessary/helpful supports. To best enable our staff to provide your child with a valuable experience, the information provided will be shared with ZooCamp staff, teen volunteers, and Paul V. Sherlock Center on Disabilities consultants.

This completed and signed Scholarship Application must be received no later than **April 11<sup>th</sup>, 2022**.

Incomplete and late applications will not be considered. Please make sure that all the following are included:

- Scholarship Application Parts 1 - 3
- Camper Personal & Medical Information Form (2 pages)

Please note: If selected, scholarship recipients will be asked to write a short note or draw a picture, illustrating how they enjoyed their time at Summer ZooCamp. Such tokens are cherished by our supporting donors as evidence of their impact on the lives of children.

The deadline is **April 11<sup>th</sup>, 2022**. Submit completed applications to:

Roger Williams Park Zoo, Attn: ZooCamp Director, 1000 Elmwood Ave, Providence, RI 02907

# Application Part 1 (to be completed by parent/guardian)

Parent/Guardian Name: \_\_\_\_\_

Parent E-mail: \_\_\_\_\_

Parent Phone: Home #: (\_\_\_\_) \_\_\_\_\_ Work #: (\_\_\_\_) \_\_\_\_\_ Cell #: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Transportation is not provided by RWPZoo. What are your transportation arrangements?  
\_\_\_\_\_

Where did you hear about this opportunity? \_\_\_\_\_

Have you applied for the RWPZ Scholarship Fund for Children with Autism before? \_\_\_\_\_

Camper's Name: \_\_\_\_\_

Current Grade: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Gender: M or F

In which type of classroom does your child spend 51% or more of their time?

General classroom    Resource room    Self-contained classroom    Other \_\_\_\_\_

Does your child require an aide or PASS worker in school?    Yes    No

- If yes, please note that your child is still eligible for a scholarship and welcome at ZooCamp, but if accepted, a non-parent must accompany your child to ZooCamp. This aide will not be provided by RWPZoo.  I understand    N/A

Each camper receives one complimentary t-shirt. Please indicate camper's shirt size below:

Child:  XSmall (4-5)    Small (6-8)    Medium (10-12)    Large (14-16)  
Adult:  Small    Medium    Large    XLarge

If camper will be **age 11 - 14** at time ZooCamp (please number your first, second and third choice of sessions):

CH Week 2: 06/20 – 06/24 Beyond the Panda  
CH Week 3: 06/27 – 07/01 The Cultural Climate Change  
CH Week 5: 07/11 – 07/15 The Cultural Climate Change  
CH Week 8: 08/01 – 08/05 Beyond the Panda

CH2	
CH3	
CH5	
CH8	

**The Cultural Climate (Change):** It's a brave new world, where our news comes in headlines, our messages need just the right filter and we're all giving and getting likes on our journey to go viral. How can wildlife, resource and environmental conservation messages evolve to reach this new audience? This week we'll examine the connection between conservation & pop culture and explore new ways to get the message out—in 144 words or less.

**Beyond the Panda:** Simon Watt said it hilariously but wisely: "we can't all be pandas". If there's one thing we're learning, it's that everything on this earth is connected in some way and each creature has their important role to play—so why does it seem that some animals get more than their share of the conservation spotlight? This week we'll explore the ins and outs of animal conservation campaigns and work to showcase the inner beauty of all animals in need.

## **Application Part 2 (to be completed by parent/guardian)**

Please explain, in 500 words or less, why you are seeking this ZooCamp scholarship opportunity for your child. All information provided will be kept in the strictest confidentiality.

Print or type in the space below or in an attached letter.

### **Application Part 3**

**This section must be completed by the child. Application will be considered incomplete if completed by an adult.**

Summer ZooCamps at Roger Williams Park Zoo are exciting experiences for animal lovers. Please share why you are interested in attending ZooCamp this summer in any way you see fit – a letter, photos, artwork, a video, etc. Parents may dictate alongside student artwork.

I hereby attest that the information provided is accurate. I understand that all information is kept strictly confidential within the team supporting my camper at ZooCamp. I also understand that it is my responsibility to attend one (1) camp orientation prior to my child's week at camp, communicate thoroughly with the ZooCamp team supporting my child, and to provide transportation, snacks, and a lunch each day for the scholarship recipient.

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Signature of parent/guardian

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Date

## Camper Personal and Medical Information

**Parent or Guardian:** Please print the following information. These details are important to ensure your child's safety and in helping us to prevent and treat health or medical problems. **Completed forms must be received at least two weeks prior to your child attending ZooCamp.** If not received by these dates, your child(ren) will not be permitted to attend ZooCamp. This form and information contained is confidential. Please complete a separate form for each camper. Call (401) 785-3510 x 358 with any questions.

Camper's Name:	<i>Last</i>	<i>First</i>	<i>Nickname (if any)</i>
Camp Name and Week(s)			Gender: M or F
Age (at Camp):			Date of Birth: <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px;"></span>

**Emergency Contacts:**

In the event that a parent or guardian cannot be reached, please designate two individuals other than yourself that may be contacted in an emergency:

Full Name	Relationship	Best Phone Number to Use:
		(     )
Full Name	Relationship	Best Phone Number to Use:
		(     )

**Medical Information:**

This information does not have to be verified by a doctor. Please circle the answer below and give details or initial as indicated. **Please print.**

1. Does the camper have any allergies? NO YES (Please list)

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2. All children are welcome at Roger Williams Park Zoo programs. Please provide us with the tools necessary to give your child the best possible experience at ZooCamp by informing us of any and all special considerations - this may include information on allergies, accessibility concerns, behavioral, psychological or emotional conditions or other special needs. Details of any Individualized Education Plans (IEP) or Behavior Plans used with your child at school can often be helpful.

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3. Is the camper currently taking any medications? NO YES (Please list)  
(Please **include** medications taken at home.)

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**Any medication that is to be administered to a camper routinely or in an emergency must be given to the Zoo EMT in a prescription bottle with the following information clearly displayed: child's name, name of medication & instructions. A Medication Permission Slip MUST also be completed at that time. If you have any questions, please call.**

4. Does the camper carry an Epi-pen or inhaler? NO YES (Please list)

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**Permissions:**

- 1. I authorize Roger Williams Park Zoo to give my child basic first aid as needed: YES Initials: \_\_\_\_\_
- 2. I authorize Roger Williams Park Zoo to give my child over-the-counter medicine, such as Tylenol or Pepto Bismol as needed: NO YES Initials: \_\_\_\_\_
- 3. In case of an emergency where a parent or legal guardian cannot be reached, I hereby give consent to the Roger Williams Park Zoo to secure treatment for my child: NO YES Initials: \_\_\_\_\_
- 4. I understand that I am responsible for updating any personal or medical information that changes by contacting the camp director: NO YES Initials: \_\_\_\_\_
- 5. I authorize Roger Williams Park Zoo to include my child’s name and photograph in camp newsletters and for other education and public relations purposes related to the Zoo: NO YES Initials: \_\_\_\_\_
- 6. I also agree to read the Roger Williams Park ZooCamp Handbook in its entirety and agree to all terms, conditions and policies contained within. I will also communicate all necessary information to my camper. YES Initials: \_\_\_\_\_
- 7. I give permission for my camper to use Roger Williams Park Zoo sunscreen and acknowledge that my camper can apply sunscreen themselves. NO YES Initials: \_\_\_\_\_
- 8. In the event that my camper is unable to apply sunscreen by themselves, a counselor may help my camper apply sunscreen as necessary. NO YES Initials: \_\_\_\_\_

**Authorized Pick-Up:**

Please list up to six names of anyone (**including yourself**) who will be picking your child up from ZooCamp. Your child will only be released to the people on this list unless written permission is provided at morning drop off. All individuals on the list or in a written note, including parents, **must show a photo I.D. each time they pick up your child.** This is for your child’s safety.

Please print and write the name **exactly** as it appears **on picture I.D. (including middle names/initials)**

FULL NAME (As it appears on I.D. – no nicknames)	FULL NAME (As it appears on I.D. – no nicknames)
1.  Don't forget to list yourself!	4.
2.	5.
3.	6.

Please create a “**Kid Code**”, a secret phrase that **only** authorized pick-ups and camp administration will know. This code can help the pickup process in the event that an **ID is lost or stolen**. It **does not replace a photo ID at pick up**. The code should be one or two words and may not include any camper or adult names.

**Remember:** All individuals must show a photo I.D. each time they pick up your child. Provided names **must match photo I.D. exactly**. There will be no exceptions. This is for your child’s safety.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Relationship to camper:** \_\_\_\_\_