

ranger Application Instructions

**2020-2021 Urban Ranger Corps Program Season**

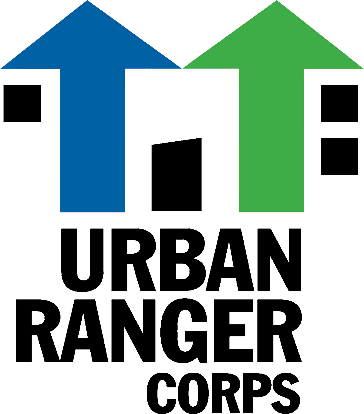
1. The Urban Ranger Corps (URC) serves boys and young men ages 12 to 18 throughout the Kansas City Metropolitan area. URC is uniquely designed to assist members in discovering their individual talents, skills and abilities while guiding them successfully from boyhood to manhood.
2. All applicants selected for the URC program will be selected based on the following criteria:

* Applicants must currently be in the 6th or 7th grade during the 2019-2020 academic school year to apply. **We do not accept applications from students who are currently in the 8th grade or above or if they turn 15 before December 31, 2020**.
* Applications must be filled out completely and submitted on time. If an application is submitted late or incomplete, it will not be reviewed.
* Applicants can reside anywhere within the Kansas City Metropolitan area including the counties of Jackson, Johnson or Wyandotte. Targeted enrollment will take place with students who live in the following zip codes: 64110, 64127, 64128, 64130, or 64132.
* Applicants must participate in a formal interview with Urban Ranger Corps staff. Applicants must have a neat, clean and professional appearance.
* All applicants must agree to complete a year-round Individual Career and Academic Plan (ICAP) with the URC program.

1. Acceptance into the URC program represents a partnership between the participant, his family and the organization. We expect all parties to uphold a commitment to this partnership and believe that it is essential to the overall success of the participant. A partnership agreement will be signed by all parties at the time of the interview.
2. Please submit the following materials as a part of your application packet.

* Completed Application; signed and dated. A blank/fillable application can be downloaded at ***www.urckc.org/apply***.
* Most recent grade/report card for the current 2019-2020 school year.
* Two (2) reference letter forms must be completed by someone who is not a parent or relative. Preferably by a coach, teacher, pastor, etc. Two reference letter forms must be submitted before an interview can be scheduled. Blank/fillable reference letter forms can be downloaded at ***www.urckc.org/apply***.
* An updated physical. All *new applicants* are required to have a recent physical (past 12 months) and must submit a physical form with this application.

1. A complete and signed application packet can be faxed, mailed or hand delivered to the **Urban Ranger Corps** office located at **5908 Swope Parkway, Kansas City, MO 64130**. **Applications are due on or before Saturday, March 7, 2020.** If you have questions about this application packet or have any other concerns, please call our office at 816-333-6455. To learn more about the Urban Ranger Corps or to download an application, visit our website at [***www.urckc.org***](http://www.urckc.org)***.***



ranger application

**2020-2021 Urban Ranger Corps Program Season**

**Student Information:** *(****Please print clearly in blue or black ink.)***

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Last Name:** | | |  | | | | | | | | | **First Name:** | | | | |  | | | | | | | **MI:** | |  | |
| **Current Address:** | | | | | |  | | | | | | | | | | | | | | | | | | | | | |
| **Current City:** | | |  | | | | | | | **Current State:** |  | | **Current Zip:** | | | | |  | | | **County:** | |  | | | | |
| **Mobile Telephone:** | | | | | | |  | | | | | | **Other:** | | |  | | | | | | **Type:**  Home  Work | | | | | |
| **Email**: | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| **Age:** |  | | | | **Date of Birth:** | | | |  | | | | **Adult T-Shirt Size**: | | | | | | **S  M  L  XL  2XL  3XL** | | | | | | | | |
| **Current School:** | | | |  | | | | | | | | | | | **Current Grade Level:** | | | | | **6th  7th** | | | | | **GPA:** | |  |
| **Ethnicity** *(select one)***:** | | | | | | | | Hispanic or Latino  Non-Hispanic or Latino | | | | | | | | | | | | | | | | | | | |
| **Race** *(select all that apply)***:** | | | | | | | | American Indian/Alaska Native  Asian  Black/African American  Hawaiian/Pacific Islander  White  Black/African American and White | | | | | | American Indian/Alaska Native and White  Asian and White  American Indian/Alaska Native and Black/African American  Other Multi-Racial  Unknown/Not Declared | | | | | | | | | | | | | |

**Parent/Guardian Information:**

**1. Parent/Guardian (Primary Contact):**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Last Name:** | |  | | | | **First Name:** | |  | | **MI:** |  |
| **Mobile Telephone:** | | | |  | **Other:** | |  | | **Type:** HomeWork | | |
| **Email:** |  | | | | | | | | | | |
| **Marital Status:** | | | Single  Married | | | | | | | | |

**2. Parent/Guardian**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Last Name:** | |  | | | **First Name:** | |  | | **MI:** |  |
| **Mobile Telephone:** | | |  | **Other:** | |  | | **Type:** HomeWork | | |
| **Email:** |  | | | | | | | | | |

**Household Information:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **No. of people in household where student lives?** | Over 21**:** |  | Between 18-21: | |  | Under Age 18: |  |
| **Does Your Child receive free or Reduced lunch? *[This information is required.]*** | | | | Yes No | | | |

**Emergency Information:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Emergency Contact:** |  | **Phone:** | |  |
| **Relationship to Student:** |  | | **Email:** |  |

**Medical Information:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Child’s Doctor:** |  | | **My child doesn’t have health insurance.** | | |
| **Health Insurance Company:** | |  | | **Policy #:** |  |

**Health Questions:**

1. **Do you have any known health or medical conditions for which you are receiving treatment?  Yes  No If yes, please explain?**

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|  |

1. **Do you have any health or physical limitations that could prevent you from working, exercising, hiking in the summer heat, using latex acrylic paint?  Yes  No If yes, please explain?**

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**Authorization and Agreement:**

**Program Participation**

I acknowledge that I am the parent or legal guardian of the applicant above and that he has my permission to participate in the 2019-2020 Urban Rangers program, consisting of a summer session and a year-round session based on a regular academic school year. I understand that I am welcome to visit and observe the applicant in training or at a project site at any time, as long as I do not interfere with the activity nor endanger the safety of either the applicant or myself.

**Audio-Visual release**

I hereby authorize and consent the ***Urban Ranger Corps***, a not-for-profit organization, its legal representatives, successors or assigns, shall have the absolute right to use, publish, copyright or assign all photographic portraits or pictures, television spots, blogs, websites, videotapes and/or stories, or any part hereof, they have taken or made of me on this date or in which I may be included in whole or in part. I hereby waive the opportunity or right to inspect or approve finished photographs, films or tapes or the use to which it may be put, or the copy of illustrations used in connection therewith or the use to which it may be applied.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Parent/Guardian Name:** |  | | | |
|  | *Please print clearly.* | | | |
| **Parent/Guardian Signature:** | |  | **Date:** |  |

ranger questionnaire

**The Ranger Questionnaire must be completed by the applicant and not the parent. Please PRINT CLEARLY in blue or black ink. Use the back page of the application or attach additional paper if needed.**

1. **How did you learn about the Urban Ranger Corps?**

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| --- |
|  |

1. **What things interest you the most?** *(Check all that apply.)*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Math | Fashion | Music | Construction | Culinary Arts |
| Science | Public Speaking | Gardening | Business | Dancing |
| Arts &Crafts | Writing | Landscaping | Making Money | Sports: |
| Biology | Singing | Building | Serving Others | Other: |

1. **On a scale from 1 to 10, how important is it for you to graduate from high school?**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | | **3** | **4** | **5** | **6** | **7** | **8** | | **9** | **10** |
| *Not Important* | |  | | | | | | | *Very Important* | | |

1. **On a scale from 1 to 10, how important is it for you to attend and graduate from college?**

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1** | **2** | | **3** | **4** | **5** | **6** | **7** | **8** | | **9** | **10** |
| *Not Important* | |  | | | | | | | *Very Important* | | |

1. **In your own words, what would you like to do after you graduate from high school?**

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| --- |
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1. **Why do you want to be a part of the Urban Ranger Corps?**

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1. **Have you ever done hard work that was physically challenging?  Yes  No If yes, please explain?**

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1. **Do you prefer to:**  **Work Alone**  **Work with others  Doesn’t Matter**

1. **Briefly describe a situation or job in which you had to overcome obstacles?**

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1. **Did you have difficulty accepting supervision and/or following instructions?**  **Yes**  **No If yes, please explain?**

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**partnership agreement**

**Parents and Rangers in the Urban Ranger Corps, will be required to *adhere to*, *participate in*, and/or *maintain* the requirements below. Please check each box letting us know that you understand the program expectations.**

**Ranger Commitment:**

|  |  |
| --- | --- |
| **✓** | **Check Each Box if you understand.** |
|  | **Complete Summer Session program orientation. This may include sitting, standing, running, jumping, climbing or hiking.** |
|  | **Adhere to all policies, rules and expectations set forth in the URC Handbook.** |
|  | **Complete an Individual Career & Academic Plan (ICAP) at the beginning (due October 1st) of the 2020-2021 academic school year. All ICAP submissions must be followed up with a one-on-one meeting with the URC Success Coach.** |
|  | **Maintain a GPA of 2.3 or higher throughout the 2020-2021 academic school-year. Attend tutoring and/other academic support sessions if your GPA is lower than 2.3.** |
|  | **Attend Saturday morning mentoring sessions once per month during the 2020-2021 academic school-year.** |
|  | **Complete 20 or more hours of Community Service (10 per semester) during the 2020-2021 academic school-year.** |
|  | **Maintain satisfactory school attendance; missing no more than 5 unexcused days per semester. Incur no more than one (1) suspension from school during the 2020-2021 academic school-year and/or the 2020 URC Summer Session program.** |
|  | **Avoid any activity involving violence and/or illicit drug use that may or may not result in legal action during the 2020-2021 academic school-year. This activity may result in immediate dismissal from the Urban Ranger Corps program.** |
|  | **Notify the Urban Ranger Corps office whenever there is a change in address or school attended.** |

**Parent Commitment:**

|  |  |
| --- | --- |
| **✓** | **Check Each Box if you understand.** |
|  | **Attend parent orientation prior to your child beginning the program. This usually occurs in May.** |
|  | **Adhere to all policies, rules and expectations set forth in the URC Handbook.** |
|  | **Submit child’s quarterly grade card or progress report to the Success Coach (one each quarter) during the 2020-2021 academic school-year.** |
|  | **Provide us with accurate and up-to-date contact information (i.e., email, telephone, home address, etc.).** |
|  | **Attend at least one Parent Academy throughout the program year.** |

**Acknowledgement & Agreement:**

I want to participate in the 2020-2021 Urban Ranger Corps program year. I understand and agree to perform all the **Requirements** outlined above.

**Ranger:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Print:** |  | **Sign:** |  | **Date:** |  |

**Parent/Guardian:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Print:** |  | **Sign:** |  | **Date:** |  |

**Urban Ranger Corps Staff:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Print:** |  | **Sign:** |  | **Date:** |  |

waiver and Release form

**This Waiver and Release form must be completed by the Parent. Please PRINT CLEARLY in blue or black ink.**

**Your child’s safety is the biggest priority to Urban Ranger Corps. However, before your child can participate in any of our 2020-2021 service events, work projects or program activities, this attached waiver must be signed and dated by a parent or guardian.**

I am the parent or guardian of  (*applicant name*), and I am signing this waiver because I want my child to participate in the 2020-2021 service events, work projects and programs activities of the **Urban Ranger Corps**.

I am fully aware that my child’s participation in the **Urban Ranger Corps** program is totally voluntary. In consideration of the **Urban Ranger Corps**, I agree to permit my son to participate in the service events, work projects and program activities; the receipt and sufficiency in which consideration is hereby acknowledged, I agree as follows:

1. I, individually, and on behalf of my child (*the applicant*) and our respective heirs, successors, assigns and personal representatives, hereby release, acquit and forever discharge the **Urban Ranger Corps** and their staff, parents, volunteers, agents, board members, officers, trustees and representatives (in their official and individual capacities) from any and all liability whatsoever for any and all damages, losses or injuries, including death, to persons or property or both, including but not limited to any claims, demands, actions, causes of action, damages, costs, expenses and attorney’s fees, which arise out of, during or in connection with my child’s (*the applicant*) participation in the service events, work projects and program activities, including but not limited to any damages, losses, or injuries to persons or property or both, which may be sustained or suffered by my child or any person in connection with my child’s (the applicant) association with, or participation in, activities at, sponsored by, or arising out of the **Urban Ranger Corps** service events, work projects and program activities.
2. I agree that this Waiver and Release is intended to be as broad and inclusive as permitted by the laws of the state of Missouri and/or Jackson County, and if any portion hereof is held invalid, it is agreed that the balance hereof shall, notwithstanding, continue in full legal force and effect.
3. I hereby consent to any publicity, including the use of my child’s name and likeness in connection with my child’s participation in the **Urban Ranger Corps** service events, work projects and program activities.
4. In signing this Waiver, I hereby acknowledge and represent that I have read this entire document, that I understand its terms and provision, that I understand it affects my legal rights and those of my child (*the applicant*), that it is a binding Agreement, and that I have signed it knowingly and voluntarily.

**Authorization and Agreement:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Parent/Guardian Name:** |  | | |
|  | *Please print clearly.* | | |
| **Parent/Guardian Signature:** |  | **Date:** |  |

Ranger Reference Form A

**This form must be completed by an adult who is not a relative or family member. Please PRINT CLEARLY in blue or black ink. Use the back page of the application or attach additional paper if needed.**

**Program Applicant:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Last Name:** |  | **First Name:** |  |

**Person Completing This Form:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Last Name:** |  | | **First Name:** | |  |
| **Occupation:** |  | **Email:** | |  | |

1. **How long have you known the applicant? Explain your relationship.**

|  |
| --- |
|  |

1. **In your opinion, how would participating in the Urban Ranger Corps be of help or benefit to the applicant?**

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1. **To the best of your knowledge, how well does the applicant follow instructions?**

|  |
| --- |
|  |

1. **How well does the applicant work with others when part of a team or group?**

|  |
| --- |
|  |

1. **Regarding the individual’s participation in the Urban Ranger Corps program, I would:**  Recommend  Not Recommend

**Acknowledgement:**

The above statements are true to the best of my knowledge:

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |

Ranger Reference Form B

**This form must be completed by an adult who is not a relative or family member. Please PRINT CLEARLY in blue or black ink. Use the back page of the application or attach additional paper if needed.**

**Program Applicant:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Last Name:** |  | **First Name:** |  |

**Person Completing This Form:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Last Name:** |  | | **First Name:** | |  |
| **Occupation:** |  | **Email:** | |  | |

1. **How long have you known the applicant? Explain your relationship.**

|  |
| --- |
|  |

1. **In your opinion, how would participating in the Urban Ranger Corps be of help or benefit to the applicant?**

|  |
| --- |
|  |

1. **To the best of your knowledge, how well does the applicant follow instructions?**

|  |
| --- |
|  |

1. **How well does the applicant work with others when part of a team or group?**

|  |
| --- |
|  |

1. **Regarding the individual’s participation in the Urban Ranger Corps program, I would:**  Recommend  Not Recommend

**Acknowledgement:**

The above statements are true to the best of my knowledge:

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** |  | **Date:** |  |