

**"M3" YOUTH PROGRAM – SUMMER CAMP PARTICIPATION FORM**

**INSTRUCTIONS:** Please fill out this form as completely as possible and attach any pertinent supporting information or materials (e.g. – samples, articles, reviews, and syllabus) you deem helpful.

**Send to: Pastor West [pastorwest@ctlchosentolive.com](mailto:pastorwest@ctlchosentolive.com)**

Bear in mind that this is a draft proposal to participate as either an employee, a speaker and/or a volunteer and that final details and arrangements will be worked out with the **M3** Program Administrator and Curriculum Coordinator.

Name of Instructor/Assistant/Volunteer/Speaker\_\_\_\_\_

Address\_\_\_\_\_

City/State/Zip Code\_\_\_\_\_

Home Phone\_\_\_\_\_ Work Phone\_\_\_\_\_

E-Mail Address\_\_\_\_\_

Fax Number\_\_\_\_\_

1. Purpose/Goals/Involvement of and/or with Program/Camp\_\_\_\_\_

\_\_\_\_\_

2. Style of Instruction to be Used (interactive, demonstration, group discussion, lecture, combination, etc.)

\_\_\_\_\_

3. Prerequisites -are there any prerequisites for this service/program/camp: (math, reading ability, basic computer skills, etc.)\_\_\_\_\_

\_\_\_\_\_

4. Clothing/Items (is there any special clothing or items students should wear or bring?)

\_\_\_\_\_

5. Materials/Handouts/Supplies (what supplies will the students be expected to have and/or purchase? What items will be supplied by the instructor? List approx. cost associated with each item)

\_\_\_\_\_

6. Type of Space/Facilities Needed\_\_\_\_\_

7. Equipment Needed -including audio visual\_\_\_\_\_

\_\_\_\_\_

8. Total Program Hours Needed to Cover Material\_\_\_\_\_
9. Proposed Day(s) of the Week: All Camps are Monday – Friday\_\_\_\_\_
10. Proposed Time(s) of Sessions\_\_\_\_\_

Provide us with a brief description of your style and approach. Your description should briefly state your goals the methods used to obtain those goals and one sentence about your qualifications: