

School Information

Please complete and return this form by: February 1, 2009

School Name: _____

School Contact Name: _____ School Phone Number: _____

School Address: _____

Background

Please describe your school's education philosophy. Are there factors we should take into consideration in teaching any specific subjects?

What concepts taught at your school will tie into the CELP curriculum you have chosen?

What environmental issues are important in your area?

Is your school currently involved in any of these issues?

Does your school compost, garden and/or recycle?

Are you doing any specific classroom preparation for your CELP visit?

Will you be bringing journals? If so, should instructors plan to incorporate them into program time or will the school facilitate journaling during free time?

What are the main goals for your trip (i.e. environmental education, sustainable living, outdoor adventure, retreat)?

Have your students had previous outdoor education/overnight field trip experiences?

What is the background of your chaperones (i.e. teachers, parents, etc.)? How have you prepared them for the trip?

Meals

How many vegetarians do you have in the group (including adults)? Please provide as many details as possible (i.e. no red meat, no meat of any kind, vegan, etc.).

Are there any dietary restrictions that apply to your whole group (i.e. kosher)?

Are there any severe dietary allergies in your group?

Are there any birthdays in your group (include name and date)?

Special Needs

We are happy to work with you in making our program accessible for students with special needs. It is imperative, however, that we are aware of the need for accommodation **prior to your trip to camp**. Please describe any students who have special needs in the space below. Feel free to use additional pages as needed.

Other Information

Grade of students: _____

Number of male students: _____

Number of male chaperones: _____

Number of female students: _____

Number of female chaperones: _____

Total number of students: _____

Total number of chaperones: _____

** A Chaperone is any adult (parent or teacher)*

Will chaperones be sleeping in the cabins with the students? _____

**You will be notified regarding the number of male/female cabins and the number of CELP groups once this form is received.*

Please rate your group's general water comfort level/swimming ability

Circle one: 1= Not comfortable, 2= Somewhat comfortable, 3= Comfortable, 4= Very comfortable

This will be our group's _____ year with the **Catalina Environmental Leadership Program**

Has the Head Chaperone ever been to CELP? _____ If so, how many times? _____

Thank you for taking the time to complete and return this form. All information you share with us prior to your arrival will help to make your CELP experience a positive one. Please call if you have any questions!