

Hawai'i Green Collar Institute Fall 2017 Application



Mahalo for applying to the Hawai'i Green Collar Institute (HGCI) coordinated by the Mālama Learning Center. If you are not completing this on a computer, please type or print legibly in black ink. Answer all questions as best you can and feel free to attach pages. Return this application form to chelsey@malamalearningcenter.org. Or you may print and mail this form to PO BOX 1662 Honolulu, HI 96806.

All materials are due (postmarked if mailed) by **September 8, 2017**.

First Name:		Last Name:		
Address:				
City:		State:		
Phone:		Email:		
Date of Birth:				
Male/Female				
High School Attending:				
Current year: (circle)		Sophomore	Junior	Senior

1. Tell us a little about where you live. Describe the community you live in and how you feel about it.
2. If you could improve one environmental condition having to do with your island's watersheds (from the mountains to the ocean), what would it be? Why?

3. What “green” or aloha ‘āina activities have you already participated in? Please describe what you did and how you felt about it.

4. Why do you want to participate in HGCI? What do you want to get out of it?

5. This program will require various forms of physical participation (sun exposure, dust, pollen, camping, hiking, getting dirty, etc.). Do you have any health, dietary, or other conditions that would need to be accommodated?
Yes ___ No ___

If yes, please list any accommodations you would need:

6. Do you have any plans that would conflict with your full participation in the program, which will be conducted on: **October 9-13, 2017 from 8am-3pm including a two-night camp on 10/10-10/12?**

Yes ___ No ___

If yes, please explain.

7. We seek to invest in students who are willing to continue with follow-up activities after this fall intersession program. How likely are you to participate in other HGCI activities through the rest of the school year?

Likely___ Not Sure___ Unlikely___

If you answered Likely or Not Sure, please explain what kind of follow-up activities you’d be interested in such as volunteer opportunities, community workdays, college visits, resume/personal statement writing workshops, etc. If you answered Unlikely, please explain why.

8. Please provide the names and contact information of at least one **reference**, an adult who knows you quite well (a non-relative).

Name: _____

Profession: _____

Phone Number: _____ Email Address: _____

Name: _____

Profession: _____

Phone Number: _____ Email Address: _____

All applicants: (if turning in through email please type name and date below)

I have read the enclosed material about HGCI and I am applying to be a participant. I certify that all of the statements made in this application are true to the best of my knowledge.

Applicant's signature _____ date _____

For applicants under 18 years of age: mother ____ father ____ guardian ____

Parent's or guardian's name (print) _____

Parent's or guardian's signature _____ date _____



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Center