

Dear Teacher:

This packet contains the forms listed below. Look over each carefully as they will greatly assist with organizing your visit to STARBASE. If any form is missing or should you have any questions, contact our office.

# The following forms must be completed. Bring completed forms with you on your first day's visit. (See "Teacher Expectations" for further details.)

- 1. Forms Checklist
- 2. Demographics
- 3. Quick Reference Data
- 4. Class List (page 1 and 2)
- 5. Teacher & Chaperone Voluntary Participation/Consent & Emergency Contact Form/ Hold Harmless Agreement
- 6. Teacher & Chaperone Media Release
- 7. Chaperone List

#### The following forms are included for your review.

- 9. Teacher Expectations
- 10. Address & Phone Number Call Sheet
- 11. STARBASE at a Glance

#### Reminder: All adults must have a valid, government issued, photo ID.

Parents who wish to attend STARBASE are always welcome. Gate entry procedures have changed and parents are encouraged to ride the bus. If this is not an option, please carpool. The following procedures apply:

- 1. Notify STARBASE with the name(s) of the driver and adult passenger(s).
- 2. The driver must provide security personnel with a valid driver's license, proof of insurance, and vehicle registration.
- 3. Vehicles containing weapons, ammunition, illegal drugs, or prescription drugs not prescribed to someone in the

vehicle will be barred from the base.

OFFICE USE ONLY CLASS NUMBER:

> 3595 MUSTANG AVE • BATTLE CREEK ANG BASE • BATTLE CREEK, MI 49037-5567 Tel: (269) 969-3219 • Fax: (269) 969-3251



#### FORMS CHECKLIST

| CLASS NUMBER | TEACHER |
|--------------|---------|
|              |         |

Check each item below as you complete and bring with you on Day One.

| Teacher Forms  | Office Use Only |
|--|-----------------|
| 1. Forms Checklist   |                 |
| 2. Application/Demographics  |                 |
| 3. Quick Reference Data  |                 |
| 4. Class List<br><u>Student Forms</u>  |                 |
| 5. Consent & Emergency health (two-sided form)   |                 |
| 6. Public Affairs Release/ Student Code of Conduct (two-sided form, please alphabetize)                        | ū               |
| Teacher/Chaperone Forms  |                 |
| 7. Chaperone List  |                 |
| 8. Teacher & Chaperone Voluntary Participation/<br>Consent & Emergency Contact Form/Hold Harmless<br>Agreement |                 |
| 9. Teacher & Chaperone Media Release   |                 |
| Missing/Incomplete Consent Forms   |                 |

\*\*When returning your classroom packet, please note, by name, any students who you have listed on your class list but who have missing or incomplete forms. \**Also, please let us know if you have students who cannot be photographed.* 

| 1 | 4 |
|---|---|
| 2 | 5 |
| 3 | 6 |

#### SPECIAL NOTES

\* Your paperwork lists the Class Number. Ensure students are given the correct copy of forms. Each teacher, even if at the same school, has their own unique Class Number. Do not mix up forms between classes.

\*\*Students without a Consent form or an incomplete form cannot attend STARBASE.

"Staff/Volunteer forms may be brought on the day of attendance.

\*\*Students may bring a snack and a water bottle

\*\*If a student becomes ill at STARBASE, we ask that the teacher stay with and supervise the student.

Arrange all seven forms in the order listed above, with this form on top,

and bring with you on the first day of class. Thank you....



### **Student & School Demographic Information**

#### TEACHERS - PLEASE COMPLETE THIS FORM AND SUBMIT IT WITH YOUR CLASS LIST

| Teacher:         |       | Class #   |      |  |
|------------------|-------|-----------|------|--|
| Teacher's Email: |       | Date:     |      |  |
| School Name:     |       | District: |      |  |
| Address:         | City: | State:    | Zip: |  |
| School Phone #:  |       | Fax #:    |      |  |

DoD STARBASE is required to collect demographic data on all student participants. The data is used in aggregate form ONLY to compile participant statistics for the DoD STARBASE annual report to Congress. Using school records, please identify the gender and ethnicity of the total number of students in your class.

| Gender         | Number of<br>Students |
|----------------|-----------------------|
| Male           |                       |
| Female         |                       |
| Total Students |                       |

| Ethnicity           | Number of<br>Students |
|---------------------|-----------------------|
| Hispanic/Latino     |                       |
| Non-Hispanic/Latino |                       |
| Total Students      |                       |

Total student number must match for the gender and ethnicity identification charts.

#### For those students identified as NON-HISPANIC/LATINO, provide student race data. Note: The total number of students in the chart below **must match** the number identified as Non-Hispanic/Latino in the chart above.

| American Indian or<br>Alaskan Native | Asian | Black or African<br>American | Native Hawaiian or<br>Other Pacific<br>Islander | White | More Than One<br>Race | Total Number of<br>Students: Non-<br>Hispanic/Latino |
|--------------------------------------|-------|------------------------------|---|-------|-----------------------|--|
|                                      |       |                              |   |       |                       |  |

|                                  | Other                | Number of<br>Students |  |
|----------------------------------|----------------------|-----------------------|--|
|                                  | ESL/ELL              |                       |  |
| Is your school Title 1 Eligible? | Title 1 Eligible     |                       | * Military dependents include                                  |
| Yes or No                        | 501 IEP              |                       | children of Active Duty, Guard,<br>Reserve and Retired members |
|                                  | Military Dependent * |                       | of the armed services.   |



### QUICK REFERENCE DATA

# INSTRUCTIONS: Type or print the requested information below. Return to STARBASE-Battle Creek, 3595 Mustang Ave., Battle Creek ANG Base, Battle Creek, MI 49037-5567.

| NAME (LAST, FIRST)  | EMAIL ADDRESS |
|---|---------------|
|   |               |
|   |               |
| HOME OR CELL PHONE NUMBER (INCLUDE AREA CODE)<br>(OPTIONAL, EMERGENCY USE ONLY) |               |
| ( ) -   |               |

| SCHOOL NAME                             |      |                              |           |     |
|---|------|------------------------------|-----------|-----|
| SCHOOL STREET NUMBER                    | CITY |                              | STATE     | ZIP |
| SCHOOL PHONE NUMBER (INCLUDE AREA CODE) |      | SCHOOL FAX NUMBER (INCLUDE A | REA CODE) |     |
| PRINCIPAL'S NAME                        |      | SCHOOL'S HOURS OF OPERATION  |           |     |

| IMBER OF YEARS YOU'VE<br>TENDED STARBASE |
|--|
|  |

| NAME OF BUSSING COMPANY | BUSSING CONTACT PHONE NUMBER (INCLUDE AREA CODE) |  |
|-------------------------|--|--|
|                         | ( ) -  |  |

OFFICE USE ONLY

CLASS NUMBER:



Please type or print the names of your students in alphabetical order by last name and specify if the student is female or male by checking the appropriate box. We will permit acceptance into the academy only to those students whose names appear on this list. Return to STARBASE-Battle Creek, 3595 Mustang Ave., Battle Creek ANG Base, Battle Creek, MI 49037-5567.

| TEACHER NAME (LAST, FIRST) | Grade Level                             |
|----------------------------|---|
|                            |   |
|                            |   |
| SCHOOL NAME                | SCHOOL PHONE NUMBER (INCLUDE AREA CODE) |
|                            | ( ) -                                   |

#### STUDENT NAME (LAST, FIRST)

| male   | female   | 1.      |
|--------|----------|---------|
| male 🛛 | female 🖵 | <br>2.  |
| male 🛛 | female 🖵 | <br>3.  |
| male 🛛 | female 🖵 | <br>4.  |
| male 🛛 | female 🖵 | <br>5.  |
| male 🛛 | female   | <br>6.  |
| male 🛛 | female   | <br>7.  |
| male 🛛 | female   | <br>8.  |
| male 🛛 | female   | <br>9.  |
| male 🛛 | female   | <br>10. |
| male 🛛 | female   | <br>11. |
| male 🛛 | female   | <br>12. |
| male 🛛 | female   | <br>13. |
| male 🖵 | female 🛛 | <br>14. |

OFFICE USE ONLY CLASS NUMBER:

### **CLASS LIST**

| 15 | female 🛛 | male 🖵 |
|----|----------|--------|
| 16 | female 🛛 | male 🖵 |
| 17 | female 🛛 | male 🖵 |
| 18 | female 🛛 | male   |
| 19 | female 🛛 | male 🖵 |
| 20 | female 🛛 | male 🗖 |

We must have a minimum of 20 students enrolled in the the Academy. Notify our office as soon as possible if you cannot meet this minimum requirement.

| 21. | <br>female 🖵 | male 🗖 |
|-----|--------------|--------|
| 22. | <br>female   | male 🗖 |
| 23. | <br>female   | male 🗖 |
| 24. | <br>female   | male 🗖 |
| 25. | <br>female   | male 🗖 |
| 26. | <br>female   | male 🗖 |
| 27. | <br>female   | male 🗖 |
| 28. | <br>female   | male 🗖 |
| 29. | <br>female   | male 🗖 |
| 30. | <br>female   | male 🗖 |
| 31. | <br>female   | male 🗖 |
| 32. | <br>female   | male   |

Please do not add additional numbers to this list. Our facilities and equipment cannot accommodate more than 32 students at one time. Thank you for your understanding.

| OFFICE USE ONLY |
|-----------------|
| CLASS NUMBER:   |
|                 |



#### TEACHER & CHAPERONE STATEMENT OF VOLUNTARY PARTICIPATION

INSTRUCTIONS: All attending adults (this includes chaperones and classroom teacher) must sign and date below. Return to STARBASE-Battle Creek, 3595 Mustang Ave., Battle Creek ANG Base, Battle Creek, MI 49037-5567.

**BATTLE CREEK** 

I acknowledge that I am voluntarily choosing to participate in STARBASE. I also acknowledge that I have been informed of the risks involved in such activity. I hereby agree to assume all risk of accident and all risk of personal injury and damage to my personal property, sustained while on, at or about STARBASE premises. I hereby release the U.S. Government, Michigan Department of Military and Veterans Affairs, Michigan National Guard, National Guard, STARBASE, Inc., STARBASE personnel, agents or representatives, and their respective members, officers, agents, and employees from any and all liability whatsoever for any loss, personal injury or property damages which may be suffered by me while on, at or about the premises of STARBASE, irrespective of whether such loss, injury or damages shall have been due to the negligence of the U.S. Government, Michigan Department of Military and Veterans Affairs, Michigan Guard, STARBASE, Inc., STARBASE, irrespective of whether such loss, injury or damages shall have been due to the negligence of the U.S. Government, Michigan Department of Military and Veterans Affairs, Michigan National Guard, STARBASE personnel, agents or representatives, or their respective members, officers, agents, or otherwise.

I further hereby agree to hold harmless and indemnify the U.S. Government, Michigan Department of Military and Veterans Affairs, Michigan National Guard, National Guard, STARBASE, Inc., STARBASE personnel, agents or representatives, and their respective members, officers, agents, and employees from any and all loss and liability for damages on account of injuries (including death) to persons and damages to property attributable in whole or in part to me while on, at or about the premises of STARBASE. I also agree that access to STARBASE property will be restricted and subject to the direction of STARBASE personnel. All personal items and vehicles will be subject to search at the discretion of STARBASE.

| SIGNATURE | PRINTED NAME |
|-----------|--------------|
|           |              |
|           |              |

| EMERGENCY CONTACT NAME | EMERGENCY CONTACT PHONE NUMBER |
|------------------------|--------------------------------|
|                        |                                |

| DATE |  |  |  |
|------|--|--|--|
|      |  |  |  |
|      |  |  |  |

| SCHOOL  |  |  |
|---------|--|--|
| TEACHER |  |  |

OFFICE USE ONLY CLASS NUMBER:



Please Note: The statement following is legal and binding. Do not alter or modify in any way.

I, \_\_\_\_\_\_\_, hereby give STARBASE, its sponsoring agencies, and those acting under their permission and upon their authority, the absolute right and permission to copyright and/or use and/ or publish photographic portraits or pictures or motion pictures or videos of the individuals in which my child may be included in whole or in part, or composite or distorted in character, or form, in conjunction with the child's own or fictitious name, or reproductions thereof in color or otherwise, made through any media for art, advertising, trade, or any other lawful purpose whatsoever.

I waive any monetary or other rights that I or my child may have to inspect and/or to approve the finished product of the advertising copy that may be used in connection with the use to which it may be applied.

I release, discharge and agree to save harmless STARBASE, its sponsoring agencies, and those acting under their permission and upon their authority, from any liability by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the taking of said portraits, pictures, videos, or motion pictures, or in any processing tending toward the completion of the finished product.

I consent to the release of said portraits, pictures, videos, or motion pictures to other broadcast media, such as nongovernmental television, cable, or radio stations.

I further assign to the said organizations all right and title and interest in the above-described portraits, pictures, videos, or motion pictures for any further use in the area of motion pictures, videos, publicity pictures, internet, etc.

I understand and agree that said organizations may maintain video recordings, photographs, etc. for training purposes and archives.

I have read the above authorization and release, prior to its execution, and am fully familiar with its content

| SIGNATURE       | PRINTED NAME |
|-----------------|--------------|
|                 |              |
| DATE            |              |
|                 |              |
|                 |              |
| OFFICE USE ONLY |              |
| CLASS NUMBER:   |              |





### **CHAPERONE LIST**

## INSTRUCTIONS: Type or print the requested information below and return to STARBASE-Battle Creek, 3595 Mustang Ave., Battle Creek ANG Base, Battle Creek, MI 49037-5567.

| TEACHER NAME (LAST, FIRST) | SCHOOL NAME |
|----------------------------|-------------|
|                            |             |

#### CHAPERONE NAME (LAST, FIRST)

| 1.  |  |
|-----|--|
|     |  |
| 2.  |  |
| 3.  |  |
|     |  |
| 4.  |  |
| 5.  |  |
|     |  |
| 6.  |  |
| 7.  |  |
|     |  |
| 8.  |  |
| ۵   |  |
| 9.  |  |
| 10. |  |

| OFFICE USE ONLY |
|-----------------|
| CLASS NUMBER:   |



- **TEACHER EXPECTATIONS**
- 1. The below-listed forms must be completed in full and turned into STARBASE on your first day's visit.
  - Forms Checklist (1 per class)
  - School Application/Demographics
  - Quick Reference Data (1 per teacher)
  - Class List (two-page form)
  - Consent & Emergency Health Form/Hold Harmless Agreement (two-sided form)
  - Dublic Affairs Release/ Student Code of Conduct (two-sided form)
  - Chaperone List
- 2. At minimum, one adult chaperone–who has the school's authorization to monitor the students in the unlikely event you are removed from your students in order to attend to an emergency–must accompany your classroom each week. (Please, no more than one chaperone per four students per visit.)
- 3. The Teacher & Chaperone Statement of Voluntary Participation must be read and signed by yourself and your attending adult chaperone(s). Bring these forms with you on your first day's arrival and return them to STARBASE. Each visit following, if you bring a chaperone who has not attended previously and, likewise, has not read and signed the form, the form must be signed and turned in to STARBASE promp at the visit's start. These forms only need to be signed and submitted once. We will keep these forms on file.
- 4. Do not substitute students when one is absent. Bring the same students each week.
- 5. If your travel will delay you more than 15 minutes, please notify our office (see STARBASE Address & Phone Number Call Sheet).
- 6. You must be with your students at all times (i.e., you may not leave for lunch).
- 7. Assist the STARBASE staff with classroom management in all student activities.
- 8. Please read and discuss the "Student Code of Conduct" with your students.
- 9. STARBASE does not provide transportation. You and your school must make appropriate arrangements.



### ADDRESS & PHONE NUMBER CALL SHEET

## Mailing Address STARBASE-Battle Creek 3595 Mustang Ave. Battle Creek ANG Base Battle Creek, MI 49037-5567

## **Phone**

- Amber Waterbury: (269) 969-3219 \*\*\*Cell : (269) 967-2901
- Amy Markos: (269) 969-3241
- Mary Clark: (269) 969-3284
- Megan Webb: (269) 969-3219 (Office Manager)

## <u>Email</u>

- Awaterbury@starbasebattlecreek.org
- Amarkos@starbasebattlecreek.org
- Mclark@starbaserebattlecreek.org
- Mwebb@starbasebattlecreek.org

# PLEASE NOTE

If your bus is running 15 or more minutes late, notify our office. We have many activities planned and need to modify the schedule accordingly—particularly if a tour is on the day's agenda. Thank you.

• The STARBASE program is at the Battle Creek Air National Guard Base.

- STARBASE is a five-week, one day per week academy.
- Class hours are 9 am to 2 pm for all five days.
- STARBASE is an enrichment program focusing on STEM (Science, Technology, Engineering, and Mathematics)

BATTLE CREEK

subjects and uses the aerospace field as a theme.

- The students will have an opportunity to learn a variety of concepts while at STARBASE, including:
  - Metric units of measurement
  - Newton's laws of motion
  - Teamwork

A Department of Defense Youth Program

- Engineering design process
- Chemical reactions
- ✓ Robotics

✓ Rocketry

3D computer aided design

Physics of flight & Buoyancy

- Technology innovations
- Properties & states of matter
- Basic Coding
- · While at STARBASE, the students will have tours of Western Michigan University College of Aviation
- Each student will receive a "Certificate of Achievement" upon successful completion of STARBASE.
- There is a maximum of 30 students per classroom and a minimum requirement of 20.
- At least one chaperone in addition to the classroom teacher must accompany the group with each visit. This chaperone must be able to act upon the schools authority and represent the interest of the school in the event of an emergency situation.
- · You need to make arrangements for your transportation to and from STARBASE.
- Students, teachers, and chaperones need to bring their own lunch-including drinks-for each visit.
- For program eligibility, you must complete all specified forms and additional paperwork prior to attending.

### STARBASE AT A GLANCE