

**SUMMER 2017**

**APPLICATION FOR TALOALI CAMPERSHIP**

**Guidelines**

* Applications are being accepted for up to **10** OSD students to attend Camp Taloali in Stayton, Oregon, for **1** one-week session during the summer of 2017.
* **Completed applications should be sent to: Friends of OSD, PO Box 15053,**

**Salem, OR 97309.**

***Due date: April 15, 2017***

**Eligibility**

* Applicants must be enrolled at the Oregon School for the Deaf.
* Applicants must be between the ages of 6 and 18.
* Campership recipients must also complete Camp Taloali’s application, and be accepted to attend camp. Camp Taloali applications can be found at this website:

[**www.taloali.org**](http://www.taloali.org)

* *Please write “****Friends of OSD****” on the top of the first page of the Camp Taloali application.*

**Selection Criteria**

* **Completed applications MUST be received by the due date listed above.**
* School achievement and participation in OSD activities as appropriate will be considered.
* Campership applications will be reviewed by a committee of ***Friends of OSD*** board members and Oregon School for the Deaf staff.
* Applicants will be notified of the results by **May 1, 2017**.

**Questions?** Contact Charlotte Iliff at **char.iliff@gmail.com**



**CAMPER INFORMATION**

Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ GPA (if applicable)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applying for Day Camp or Overnight Camp?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Activities at school\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Activities at home and in your community\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Why do you want to go to Camp Taloali? (50 words or less)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Attach a signed recommendation form from at least **one teacher**.

Attach a signed recommendation form from at least **one other OSD staff**.

Parent signature/Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent contact information (Name, mailing address, phone and/or email – PRINT CLEARLY)

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**OSD TEACHER RECOMMENDATION**

**FOR**

**TALOALI CAMPERSHIP**

Student being recommended\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please state, in your opinion, why this student is a good candidate for Camp Taloali and whether or not this student would be able to participate without the financial assistance of a ***Friends of OSD*** Campership.)

OSD teacher signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please print your name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**OSD STAFF RECOMMENDATION**

**FOR**

**TALOALI CAMPERSHIP**

Student being recommended\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please state, in your opinion, why this student is a good candidate for Camp Taloali and whether or not this student would be able to participate without the financial assistance of a ***Friends of OSD*** Campership.)

OSD staff signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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