

# 2026-2027 PDDBM Afterschool Program Application Form

**Student Information:** The information on this application will be kept confidential. It will be used to determine eligibility for Please Don't Die Black Men's (PDDBM) Afterschool Programs. **Some of the general information entered below will be used as statistics to apply for grants and other funding for our afterschool programs.**

It will take approximately 5 - 10 minutes to complete.

Please check "**None**" or put "**N/A**" for all questions that do not apply.

## Program Cost

FREE FOR ALL MIDDLE AND HIGH SCHOOL STUDENTS. TRANSPORTATION IS PROVIDED. \*Fifth-grade students may be considered for enrollment at the discretion of the program instructor and only if space is available. All accepted fifth-grade students must demonstrate the ability to follow program guidelines and independently manage the use of technology required for participation.

## Location

TBA

## Program Run Time

Fashion Design - 3pm - 6pm (Biweekly on Tuesdays)

From Garden to Table - 3pm - 6pm (Biweekly on Thursdays)

Journalism - 3pm - 6pm (Biweekly on Fridays)

## Questions and/or comments

Please direct any and all questions about this form or about PDDBM Afterschool programs to the PDDBM Chairwoman and President, Ruby N Lewis, CEOCHAIR@PDDBM.ORG, (360) 241 - 4479.

## Completion of This Form

This form can be completed online (<https://forms.gle/anavaAweWufKqkGk7>) or can be printed out and mailed to:

Please Don't Die Black Men (PDDBM)  
2700 Caples Avenue #3278  
Vancouver, WA 98661

## PDDBM Afterschool Program Service Area

The PDDBM Afterschool Program is open to all students residing in and attending public school, private school, homeschool, or other educational institutions within **Clark County, WA**. Students who live outside of this service area may be accepted; however, they are solely responsible for providing their own transportation to and from all program sessions and related events—**no exceptions**. Timeliness is mandatory. Failure to arrive on time or to consistently attend may result in immediate removal from the program.

## Interview Required

Submitting an enrollment application is the first step in the PDDBM Afterschool Program selection process. To ensure that students and instructors are a strong match, all applicants and their

parent(s)/guardian(s) will be required to participate in a scheduled interview. This interview will serve to confirm that families fully understand the expectations, time commitments, and responsibilities associated with the program(s), and that both the student and parent/guardian are committed to active participation. Acceptance or denial notifications will be sent no later than **August 21, 2026**.

**Open House**

There will be **two open house events** for parents/guardians and students to visit the program space, meet the instructors, and ask any questions they may have prior to the start of the program. The open houses will be held on **August 29, 2026**. **Location and time will be announced at a later date.**

*\* Indicates required question*

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1. **Email \***

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2. **Student's Name** (Last Name, First Name, MI) \*

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3. **DOB** (MM/DD/YYYY) \*

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*Example: January 7, 2019*

4. **Age \***

 Dropdown

*Mark only one oval.*

10 - 12

13 - 15

16 - 17

5. **Gender \***

*Mark only one oval.*


- Male
- Female
- Transgender
- Binary
- Nonbinary
- Cisgender
- Agender
- Genderfluid
- Prefer not to say
- Other:  
\_\_\_\_\_

6. **Ethnicity \***

*Mark only one oval.*

- African-American/Black Americans
- Alaska Natives
- Asian/Asian Americans
- Caucasian/White Americans
- Hispanic/Latino Americans
- Multiracial
- Native American
- Pacific Islander/Native Hawaiian
- Russian
- Other:  
\_\_\_\_\_

7. **Current Grade in School** (Select the grade that the student is currently enrolled in/will be enrolled in for the 2026-2027 school year.)

\*  Dropdown

Mark only one oval.

5th

6th

7th

8th

9th

10th

11th

12th

8. **Which Type of School is the Student Currently Enrolled In/Will Be Enrolled In for the 2026-2027 School Year?** (Check All That Apply)

\*

Check all that apply.

Homeschool

Public School

Charter School

Special Education School

Career and Technical School

Online School

Religious School

Boarding School

Language Immersion School

Private School

Other: \_\_\_\_\_

9. **Current School Attending** (List the complete name of the school the student is currently enrolled in for the 2026-2027 School Year.)

\*

\_\_\_\_\_

## Afterschool Program of Interest

Please select the afterschool program you are interested in below.

### **Fashioning the Future Fashion Design Program**

PDDBM's Fashion Design Program is a commitment to empowering the future, providing a dynamic platform for young minds to explore creativity and acquire vital fashion design skills. Functioning as a launchpad, the program fosters artistic potential, equipping students with tools to craft distinctive designs and shape their individuality. The celebration of budding designers culminates in events like the PDDBM Black History Month Fashion Show and Kwanzaa Celebration, which go beyond mere exhibits, serving as tributes to passion and dedication. Through this program, students not only nurture their talents but also build confidence as innovative designers, contributing to a fashion landscape that values diversity, talent, and cultural heritage for generations to come.

### **Giving Youth A Voice Through Journalism Program**

PDDBM empowers middle and high school students by involving them in the development of PROUD magazine, instilling virtues crucial for their future success. The magazine provides a platform for students to hone skills in marketing, editorial work, sales, journalism, and photography, fostering personal and professional growth. Operating as a hands-on learning experience under the guidance of an experienced editorial team, the program serves as a showcase for the nonprofit's impactful work in education and advocacy. This program is a way for where voices to contribute meaningfully to their communities.

### **From Garden to Table Culinary & Garden Program**

PDDBM's *From Garden to Table* Program empowers middle and high school students with the knowledge and skills to grow, prepare, and understand their own food, promoting equity, health, and self-sufficiency. Through hands-on learning, students build confidence in the kitchen at Generations Church by developing cooking, meal planning, and budgeting skills, while also gaining real-world experience at the Maplewood Moseley Community Garden by planting, maintaining, and harvesting fresh produce. This program addresses food access disparities while fostering independence, cultural connection, and lifelong wellness, equipping students to make informed choices and contribute to healthier, stronger communities.

## 10. **PDDBM Afterschool Program of Interest** (Check all that apply) \*

*Check all that apply.*

- Fashioning the Future Fashion Design Program
- Giving Youth A Voice Through Journalism Program
- From Garden to Table Culinary & Garden Program

**Student's Contact Information**

Please complete the following questions about the student's and their parent/legal guardian's contact information.

11. **Primary Parent/Legal Guardian's Name** (Last Name, First Name, MI) \*

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12. **Student's Physical Home Address** \*

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13. **Student's Mailing Address** (if different from their home address)

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14. **Student's Contact Phone Number** (999-999-9999) \*

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15. **Which Type of Phone Number Is This?** \*

*Mark only one oval.*

- Cell Phone
- Landline/Home Phone
- Message Phone
- Other:  
\_\_\_\_\_

16. **Primary Parent/Legal Guardian's Contact Phone Number** \*

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17. **Which Type of Phone Number Is This? \***

Mark only one oval.

- Cell Phone
- Work Number
- Landline/Home Phone
- Message Phone
- Other:  
\_\_\_\_\_

18. **Primary Parent/Legal Guardian's Contact Email Address \***

\_\_\_\_\_

19. **Emergency Contact Name (Last Name, First Name, MI) MUST Be Different From Parent/Legal Guardian \***

\_\_\_\_\_

20. **Emergency Contact Phone Number (MUST Be Different From Parent/Legal Guardian) \***

\_\_\_\_\_

21. **Emergency Contact Email Address (MUST Be Different From Parent/Legal Guardian) \***

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**Medical Information**

Please complete the following so that we may provide proper and well-informed care to your child.

22. **Student Allergies** (Please list everything the student is allergic to including medication) \*

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23. **Does the student currently have an IEP or a 504? \***

*Mark only one oval.*

Yes

No

24. **Does the student have any of the following? (Check all that apply) \***

*Check all that apply.*

- ADHD/ADD
- Atlanto-axial Subluxation and Restrictions for persons with Down Syndrome
- Autism/PDD
- Brain Injury
- Cerebral Palsy
- Cyanosis
- Deaf/Hearing Impaired
- Diabetes
- Down Syndrome
- Epilepsy
- Headaches/Migraines
- Heart Conditions and Restrictions
- Hepatitis
- Learning Disability
- Visual Impairment
- Mental Health
- Mental Retardation Mild
- Mental Retardation Moderate
- Mental Retardation Severe
- Mobility Impairment
- Muscular Dystrophy
- Multiple Sclerosis
- Non-ambulatory
- None
- Non-verbal
- Prader-Will
- Rhetts-Syndrome
- Seizures
- Speech Delay
- Spina Bifida
- Tourettes Syndrome
- William's Syndrome
- Other: \_\_\_\_\_

25. **Please explain any diagnosis checked above. \***

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26. **Student's Communication** (Check all that apply) \*

*Check all that apply.*

- Good
- Shy
- Limited Conversation
- Signs
- Interpreter Needed
- Dominates Conversation
- Inappropriate Topics
- Other: \_\_\_\_\_

27. **Restrictions** (Check all that apply) \*

*Check all that apply.*

- Behavior
- Physical Limitations
- Dietary Restrictions
- Toileting
- Medication
- None
- Other: \_\_\_\_\_

28. **Please explain any behaviors checked above. \***

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29. **List any other information you feel we should have to provide proper and well-informed care to your child.** \*

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### Consent Forms

**Please read the following terms and conditions carefully before signing. Parents/guardians will be held responsible for all consent forms they sign. Copies of signed consent forms are available upon request. Indicate below whether you agree or disagree to the terms and conditions outlined above.**

30. Please Don't Die Black Men (PDDBM) grants permission for the student listed above to participate in the PDDBM Afterschool Program for the 2026-2027 school year. In order for the student to engage in the program, I, as the parent/legal guardian, agree to hold PDDBM harmless and waive any right to make claims or lawsuits against PDDBM, its representatives, or anyone working on behalf of PDDBM. This waiver explicitly excludes injuries or damages resulting from any willful, wanton, or intentional misconduct. Acknowledging that participation in this activity is voluntary, I understand the implications of this waiver on my legal rights and those of the student named above. \*

*Mark only one oval.*

- I agree
- I disagree

31. Please be advised that participation in PDDBM's Afterschool Programs is contingent upon adherence to certain guidelines and standards. PDDBM reserves the right to refuse entry to the program to any participant. While enrolled, students agree not to harm, attack, or cause harm to PDDBM, anyone representing PDDBM, or anyone employed by PDDBM. In the event of unruly behavior, students will receive up to three warnings, after which a meeting with the parent/legal guardian will be required. If behavior continues to be unmanageable, students may be removed from the PDDBM Afterschool Program and will not be allowed to return for one full school year. It is essential for students and parents/legal guardians to acknowledge and abide by PDDBM's zero tolerance policy for vulgarity and obscenity, which will be provided one month before the program commences. Your understanding and cooperation with these guidelines are crucial to maintaining a safe and constructive learning environment for all participants.

*Mark only one oval.*

I agree

I disagree

32. **PDDBM Afterschool Program Service Area**

The PDDBM Afterschool Program is open to all students residing in and attending public school, private school, homeschool, or other educational institutions within **Clark County, WA**. Students who live outside of this service area may be accepted; however, they are solely responsible for providing their own transportation to and from all program sessions and related events—**no exceptions**. Timeliness is mandatory. Failure to arrive on time or to consistently attend may result in immediate removal from the program.

*Mark only one oval.*

I agree

I disagree

**33. Interview Required**

\*

Submitting an enrollment application is the first step in the PDDBM Afterschool Program selection process. To ensure that students and instructors are a strong match, all applicants and their parent(s)/guardian(s) will be required to participate in a scheduled interview. This interview will serve to confirm that families fully understand the expectations, time commitments, and responsibilities associated with the program(s), and that both the student and parent/guardian are committed to active participation. Acceptance or denial notifications will be sent no later than **August 21, 2026**.

*Mark only one oval.*

I agree

I disagree

### 34. **Parent and Student Consent for Participation in PDDDBM Afterschool Programs** \*

Participation in PDDDBM's afterschool programs extends beyond skill development and includes an important entrepreneurial component. All students and parents/guardians must understand and agree that active participation in both the educational and entrepreneurial aspects of the program is required for successful completion.

#### **General Expectations**

---Students enrolled in any PDDDBM program are expected to complete two projects per program during the school year.

---Participation is contingent upon both the student and their parent/guardian actively engaging in the entrepreneurial components tied to each project.

---Parents/guardians are required to be involved in each project for every program in which the student is enrolled.

---Students must raise a minimum of \$100 per entrepreneurial project per program to be considered as having successfully completed the program.

#### **Fashion Design Program Requirements**

---Two fashion shows will be held: one in the second week of February and one at the end of May.

---A parent or legal guardian **must** be present at both shows.

---Parents and students agree to sell tickets for both shows. Through the Event Incentive Program, they will receive 25% of the total value of tickets they personally sell.

---After each show, students and parents are expected to sit at their vendor table and sell the garments the student designed for the project.

#### **From Garden to Table Program Requirements**

---Students will complete two hands-on projects during the school year: one focused on growing food and one focused on preparing food.

---For the gardening project, each student will be responsible for successfully planting, maintaining, and harvesting at least two crops from the Maplewood Moseley Community Garden plot.

---For the culinary project, students will prepare a completed dish in class and participate in a live cooking experience or food presentation event.

---A parent or legal guardian must be present for all required Saturday events or public-facing activities associated with this program.

---Students and parents agree to participate in two entrepreneurial experiences per school year, which may include selling produce, prepared food items, or tickets to a tasting or showcase event.

---Through the Event Incentive Program, participants will receive a percentage of the total sales they personally generate.

#### **Journalism Program Requirements**

---Students must be present at the Black History Month Fashion Show to operate their vendor table and sell their magazines.

---Students must also participate in "Mall Day," during which they will walk through the mall to sell their magazines. This event will take place on a Saturday. A parent or legal guardian **must** be present with the student for the duration of this event.

---Parents and students agree to participate in magazine sales twice per school year and will receive a percentage of their individual sales.

### Completion Standards

Failure to actively engage in both the skill-building and entrepreneurial components of the program, including attendance at required events and achievement of fundraising goals, will result in the student not receiving credit for completing the program.

By enrolling in any PDDBM program, both the parent/guardian and student acknowledge and agree to these terms.

*Mark only one oval.*

I agree

I disagree

35. PDDBM recognizes the importance of transparency and privacy concerning the use of photos and videos featuring students. Throughout the Afterschool Program, we may capture images and footage for marketing, funding, and program-related purposes. These materials contribute to showcasing the positive impact of our programs and securing support for future initiatives. However, we respect your privacy, and as such, students and parents/legal guardians have the option to opt out of being photographed or filmed. \*

*Mark only one oval.*

I Consent to my student being photographed/videotaped.

I Do Not Consent to my student being photographed/videotaped.

36. By typing my name and date below, I, as the student participating in PDDBM's Afterschool Program, affirm that this will serve as my official digital signature. I acknowledge that the information I have provided in this afterschool application is accurate and true to the best of my knowledge. I am typing my name with a sound mind and of my own free will, understanding that this digital signature indicates my commitment to the terms and conditions outlined in the form. I willingly agree to comply with the expectations set forth by PDDBM for my participation in the Afterschool Program. \*

*Mark only one oval.*

I agree

37. **Student's Name** (First Name, MI, Last Name) \*

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38. By typing my name and date below, I, as the parent/legal guardian, acknowledge that this will act as my official signature, affirming that the information entered on this after school application is accurate and true to the best of my knowledge. I certify that I am typing my name with a sound mind and of my own free will, consenting to the terms and conditions outlined in the form. This digital signature signifies my understanding and agreement with the contents provided, and I willingly commit to abide by the terms set forth. \*

*Mark only one oval.*

I agree

39. **Parent/Legal Guardian's Name** (First Name, MI, Last Name) \*

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40. **Today's Date** \*

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*Example: January 7, 2019*

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