

# 2022 African American Rites of Passage Academy at Lane Community College

Wednesday, July 6 – Wednesday, July 20, 2022\*\*



*West African Symbol of Life-Long Learning*

*"Never let blackness be your problem, but somebody else's problem."*

*–Adam Clayton Powell, Jr.*

## Sponsored by:

Lane Community College, Office of Equity and Inclusion, our Lane CC Foundation,  
an Oregon Dept of Education African American Black Student Success Plan grant partnership with Lane ESD, and a Meyer Memorial  
Trust Equitable Education Grant

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**Orientation: Tuesday July 5<sup>th</sup> 5:30-7:30pm; \*\*Rehearsals & Capstone July 21<sup>st</sup>**

## Application Deadline:

New Student Early Bird Registration 5:00 p.m. Friday June 10, 2022

Completed applications must be received by 5:00 p.m. Wednesday, June 15, 2022

Completed applications may be delivered by US Mail or in person to Lane Community College

Concepción "Connie" Mesquita Multicultural Center Building #1, Room 210-A

4000 East 30th Avenue, Eugene, OR 97405-0640.



an equal opportunity/affirmative action institution committed to cultural diversity  
and compliance with the Americans with Disabilities Act

## 2022 African American Rites of Passage Summer Academy Student Application - Course Registration Form

Student Last Name	Student First Name	Middle Name
Other Names Used		Nickname
Most Recent School	City and State	Highest Grade Completed
School in the Coming Academic Year	City and State	What year will you Graduate?
Place of Birth	Date of Birth	Gender
Home Address	City and State	Zip Code
Home Phone Number	Student Cell Phone Number	County of Residence
Student Email *must not be a shared with another, Email is how LCC authenticates		Student Employment Status

### DEMOGRAPHICS

#### Ethnicity:

- Hispanic or Latina/Latino  
 Not Hispanic or Latina/Latino  
 Prefer not to answer

#### Race: *Please, Check all that apply*

- Black or African American  
 American Indian or Alaska Native  
 Asian  
 Native Hawaiian or Pacific Islander  
 White  
 Choose not to answer

#### Residency Code: *Please, Check one*

<input type="checkbox"/>	I	Oregon, Lane County
<input type="checkbox"/>	O	Oregon, NOT Lane County
<input type="checkbox"/>	A	Alaska
<input type="checkbox"/>	C	California
<input type="checkbox"/>	D	Idaho
<input type="checkbox"/>	V	Nevada
<input type="checkbox"/>	W	Washington
<input type="checkbox"/>	S	Other State
<input type="checkbox"/>	S	US Territory
<input type="checkbox"/>	N	International Student

(Residency for the 90 days prior to enrollment)

#### Education Level of Parent or Guardian:

- GED   
  High School Diploma   
  Some College   
  Associate Degree   
  Bachelor Degree   
  Masters Degree   
  Ph.D.

#### Income Bracket:

Free/Reduced Lunch Recipient?  Yes  No   
 SNAP  Yes  No   
 Family Size: \_\_\_\_\_ Annual Income: \_\_\_\_\_

#### Retention:

Has this student attended Rites of Passage Leadership Academies before?   
 Yes   
 No

Please list the name and year of any relatives who have attended Rites of Passage Leadership Academies:

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## 2022 African American Rites of Passage Summer Academy Emergency Contacts

Parent/Guardian 1 Last Name	Parent/Guardian 1 First Name	Relationship to Student
Parent/Guardian 1 Email Address	Cell Phone Number	Work Phone Number
Parent/Guardian 2 Last Name	Parent/Guardian 2 First Name	Relationship to Student
Parent/Guardian 2 Email Address	Cell Phone Number	Work Phone Number
Additional Emergency Contact Last Name	Emergency Contact First Name	Relationship to Student
Alternate Emergency Contact Email Address	Cell Phone Number	Work Phone Number

Will the student be carrying any medications while on campus (circle yes or no, we will speak to you about this)?

Allergies (Bees, nuts, cantaloupe...) \_\_\_\_\_

### LIABILITY RELEASE

I hereby give my permission for my student, \_\_\_\_\_ to attend and fully participate in the 2022 African American Rites of Passage Summer Academy at Lane Community College.

I declare that I am the parent or legal guardian of the above named child, and I have custody and control of the child. In the event my child is injured or should require medical attention, **I will be reachable by phone/text at all times while the student is in the program** – should it become necessary, all adults associated with the student will be contacted. I assume all risks and hazards to such participation including public and motor pool transportation to and from the activities and hereby waive, release, absolve and indemnify and agree to hold harmless the Rites of Passage Summer Academy, Lane Community College, its organizers, sponsors, supervisors, employees and participants for any claim arising out of accidental injury to my child.

**I have read, understand, and agree to the terms of the above RELEASE FROM LIABILITY.**

Signature of Parent/Guardian	Print Name	Date
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## 2022 African American Rites of Passage Summer Academy Student Participant – Media and Photo Release

**Do you give permission to the African American Rites of Passage Summer Academy for the following:**  
(check boxes & sign)

Public news media photos and interviews .....	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Public display of student special projects .....	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Participation in a research study survey of program quality and effectiveness .....	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO

Student Signature	Print Student Name	Date
Signature of Parent/Guardian	Print Parent/Guardian Name	Date