Micke Grove Zoological Society

**Zoo to You Outreach Program  
Scholarship Application**

Thank you for your interest in the *Zoo to You Outreach Program* offered by the Micke Grove Zoological Society’s Education Department. This program was launched in 2013 as an initiative to connect underserved students attending Title I schools in San Joaquin County with nature as well as to improve science literacy countywide. Please review the following information and instructions before filling out the application. Should you have any questions, please contact Allison Meador, Director of Conservation Education, at (209) 331-2138.

**IMPORTANT INFORMATION**

* The Zoo to You Outreach Program is available Monday – Friday, excluding Wednesdays, from September – December between the hours of 9:30AM and 12:00PM. No more than three programs can be provided on any given day.
* We reserve the right to restrict the number of programs provided to each school or school district. Each class may only apply once per school year.
* Scholarship funds for the Zoo to You Outreach Program are available only to the Title I K-5 schools in San Joaquin County that have at least 60% or more of their students on the Free or Reduced Lunch Program.
* This program is not available for pre-schools, high schools, or private schools or assemblies.
* Programs are designed to fit the California state science standards and Next Generation Science Standards (NGSS) and STEM frameworks for each grade level.

**HOW TO APPLY**

1. Fully complete the Zoo to You Outreach Program Scholarship Application (pages 2-3).
2. Have all teachers applying for a program within the same school and grade level complete the **pre-survey** on SurveyMonkey and then notify the Education Director, Allison Meador, at (209) 331-2138 when all teachers have submitted their response. **Your application will not be reviewed until the pre-surveys are completed by each teacher listed on your application.** The survey can be completed at: <https://www.surveymonkey.com/s/ZTYO1415>

A sample packet of survey questions can be downloaded from the Zoo to You Outreach page.

1. All teachers must agree to complete our post-visit materials and survey terms. The link to the post-survey will be sent by e-mail within 0-2 days of the program and must be completed within (6) days of the program. Teachers that fail to complete the post-survey will not be allowed to apply for a scholarship for the next school year. We thank you for completing these tasks.
2. **Mail** applications **at least three weeks** before closest desired program date to:

The Micke Grove Zoo Education Department

11793 N. Micke Grove Road

Lodi, CA 95240

Faxed or e-mailed applications will not be accepted.

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**SCHOOL INFORMATION**

School Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
**ORGANIZER/APPLICANT INFORMATION**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Names of other teachers included in this application:**

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
 **STUDENT GRADE LEVEL (circle):** Kindergarten 1st 2nd 3rd 4th 5th

**DESIRED PROGRAM DATES: \_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_** **\_\_\_\_\_\_\_\_\_\_\_\_\_**

3rd Choice

2nd Choice

1st Choice

**TOTAL # OF STUDENTS EXPECTED TO BE SERVED BY PROGRAM(S): \_\_\_\_\_\_\_\_\_\_\_\_**

**DESCRIPTION OF NEED (use back of page if necessary):**

A. What percentage of students at your school is on the Free or Reduced Lunch Program? \_\_\_\_\_\_\_\_ %

B. Please use the space below to describe your schools’ need for this scholarship.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C. Please describe how this program could supplement and enhance your science curriculum.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**By signing below, you and the teachers included in this application agree that:**

* Each teacher will complete the pre-visit survey at <https://www.surveymonkey.com/s/ZTYO1415> in order for this application to be considered.
* Each teacher will distribute the post-visit materials to the students within 0-1 days after the program and compile the results to report on the post-visit survey.
* Each teacher will complete the post-visit survey within 6 days after the program.

ORGANIZER’S SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_

TEACHER 2 SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_

TEACHER 3 SIGNATURE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_

**OPTIONAL QUESTIONS:**

1. If an individual or business is sponsoring your program, would you be willing to have your students write “Thank You” letters to the sponsor?   
     
   *Please circle*: YES or NO
2. Would you be willing to have your class(es) create posters or letters (as an entire class or in groups) reflecting what they learned from their program for the Education Department to display at the zoo and outreach events?   
    *Please circle*: YES or NO