

## Ōhāhā High School AgriCULTURE Program Application

March 14-18, 2023

Please complete the application information below and email to Kaʻiana Runnels at <u>krunnels@kohalacenter.org</u>, fax to 808-885-6707, or mail to **The Kohala Center**, attn: Ōhāhā Program, PO Box 437462, Kamuela HI 96743. Applications must be received by 5 p.m. Friday, March 10, 2023.

First Name		Middle Initial(s)		Last Name	
Mailing					
Address					
City		State		ZIP Code	
Physical					
Address (if different)					
City		State		ZIP Code	
Cell Phone		Alt Phone			
Email					
Date of Birth				Gender	
High School				Grade	
Signature				Date	

If under 18 years of age, Parent or Guardian information:

Name			
Cell Phone	Alt Phone		
Email			
Signature		Date	

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Use	e additional sheets if necessary.
1.	Why are you interested in participating in this program?
2.	Are Hawaiian cultural values, practices, and principles important to you?   Yes  No  If yes, please rate your level of interest on a scale of 0 (not at all interested) to 10 (extremely interested):  Not at all interested  0  1  2  3  4  5  6  7  8  9  10 Extremely interested
3a.	Are you interested in/engaged in gardening?
3b.	Are you interested in/engaged in farming?
	(continued on next page)

Please answer the following questions to help us gauge your goals, level of interest, and experience.

3c. Are you interested in/engaged in natural resource management?   Yes  No				
	If yes, to what extent?  Not at all   0  1  2  3  4  5  6  7  8  9  10 Extremely interested/active			
4.	What experience have you had with gardening, farming, ranching, and/or Hawaiian cultural practices?			
5.	What educational and/or career goals do you have after you graduate from high school?			
6.	Please list some educational, volunteer, and/or community service projects you've been involved in to deepen your commitment to mālama 'āina.			
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7. Please provide a scholastic or professional reference (teacher, counselor, coach, employer, etc.)					
Name					
Title					
Phone		Email			
For your parent(s) or guardian(s):  May we share your contact information with parents/guardians of other students accepted into the program about possible carpooling?  Yes No  If yes, Contact Name					
Phone Number OR Email (based on preferred contact method)					