**Summer French Program for Students in Grades 9 and 10**

**Objective of Program**

The main objective of the summer program is to give students the opportunity to strengthen their French language and expand their understanding of French culture by being immersed in a French learning environment.

**Duration:** Approximately 4 weeks (July 2nd - 28th, 2017)

**Location:** Université de Moncton

**Deadline for Application:** March 3rd, 2017

**Overview of Program**

The summer program focuses on developing students’ language skills in the areas of speaking, listening, reading and writing. Students are organized in learning groups based on their language proficiency; an assessment is administered on the first day of the program. The goal is to keep class sizes small (15 to 20 students) and homogeneous with respect to language proficiency. Students participate in a variety of learning experiences, such as oral exercises, debates, discussions as well as educational and cultural activities to improve their oral language skills. Most required instructional materials are provided (a list of required materials will be included in the information package). The teachers are experienced in creating a positive and engaging learning environment.

Classroom activities are complemented by cultural and social activities. These allow students to strengthen their language skills in relevant and practical situations. The communicative approach which promotes the integration of all four language skills (i.e., listening, speaking, reading and writing) is also reflected in these experiences.

A team of monitors also work with the students during the program. These individuals are chosen because of their expertise as strong communicators and facilitators. Most of the monitors are post-secondary students and are familiar with the Université de Moncton facilities. During the academic year, the monitors are involved in extra-academic campus activities (e.g., varsity sports, radio campus, student council, and coaching). The monitors are all highly skilled and the activities for which they are responsible are well planned and executed with the overall safety, linguistic and social development of the students in mind. Activities are geared towards reinforcement of the French language and culture.

Campus staff offers full support to students who are immersed in the French language and culture. The goal is to make the students’ stay at the Université de Moncton an enjoyable and memorable experience.

**Lodging**

Students live in residence during the 4-week program at the Université de Moncton. Male and female students are assigned rooms on separate floors of the residence. Students will share a studio for the duration of the program. To encourage the opportunity to meet new people, we will not be accepting requests to share a studio with a specific student (please refer residence rules on page 13 of the junior package).

**Eligibility:**

A total of 100 students who have completed Grade 9 or 10 by June 2017 will be chosen to participate in this program. The distribution of seats is determined on a per capita basis for each school district. In support of the provincial goal for second language proficiency, 60% of the seats are reserved for students in Post-Intensive and 40% for French Immersion students.

**Process of Application and Selection:**

* Applications are completed by the students and parents;
* The completed application form is sent to the school and signed by the French teacher;
* The school district French second language (FSL) coordinator reviews the applications received from the schools and forward successful applicants to the Department of Education and Early Childhood Development (EECD) respecting the number of allocated seats and the date of receipt of applications which is before the deadline-March 3rd;
* First-time applicants are given provincial priority. Names can be submitted to be placed on a provincial waiting list. For further details, please contact the school district FSL coordinator.

**Funding for the Program**

The Department of Education and Early Childhood Development funds the program. Funding covers the cost of the tuition, a room and meals in residence, excursions and required instructional materials. **As the overall cost per student is significant, there is an expectation that students will participate fully and remain for the full duration of the program**. Parents/guardians should be sensitive to their child’s readiness to be away from home for this length of time.

**Student and Parent/Guardian Responsibilities: Travel to and from Moncton, spending money, and $100 deposit**

**The $100 deposit is returned if a student**

1. withdraws before May 26th, 2017
2. completes the full program.

**The deposit is forfeited if a student:**

a) withdraws after May 26th, 2017;

b) does not show up on registration day;

c) causes property damage (part/full of the deposit will cover the cost of room keys or laundry cards if lost and/or other property damage);

d) decides to leave or is asked to leave the program early.

**Instructions for students/parents:**

The application form must be completed and returned to a student’s French teacher with a $100 cheque or money order, ***dated March 3rd, 2017,*** andwritten to"***The Minister of Finance - New Brunswick***". Cash is not accepted. The application form and deposit (cheque/money order) must be given to the French teacher **on or before March 3rd, 2017.** The deposit will be returned in September.

If a student is selected to participate in the program and for some reason is unable to attend, he or she should notify **Sylvie Arseneau** or **Lynn Wolverton** as soon as possible (see contact information below). This allows a student on the waiting list to participate in the program.

For more information, please visit the Université de Moncton Summer French Program website at <http://www.umoncton.ca/learnfrench/junior>. If you have any further questions, please contact:

**Sylvie Arseneau, EECD FSL Learning Specialist**

Phone: (506) 444-2846

Email: sylvie.arseneau2@gnb.ca

**Lyne Wolverton, EECD Administrative Assistant**

Phone (506) 453-2040

Email: lynn.wolverton@gnb.ca



**Grades 9 and 10 Summer French Program**

**2017 Application Form**

|  |
| --- |
| **To be completed and returned to your French teacher on or before March 3rd , 2017** |

**General Information** (Please type or print clearly)

Name of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Surname First name

Date of birth: Grade in 2016/17: Gender: M ❒ F ❒

 Day / Month / Year

I have participated in the Summer French Program last year: Yes ❒ No ❒

Name of Parent(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Surname First name

Street Address or P.O. Box:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 City, town or village Prov./Terr. Postal Code

Telephone: Emergency telephone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 Please ensure this is an email address that is checked on a regular basis.

**Please note: *You must be 17 years of age or younger as of August 1st, 2017.***

Name of School:

School District: Date:

I am currently enrolled in: Post-Intensive French/Core French ❒ French Immersion ❒

CEFR level-language portfolio (please circle your CEFR level): A1 A2 B1 B2

**School Approval of Application (for school use only)-Please complete this section and add comments:**

French Teacher Signature

Print Name Title

Comments

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please note: This application will be returned to you if the school approval section is not completed.**

**Medical Information:** This section must be completed by a parent or legal guardian. The information below is extremely important in the event of an emergency. Please provide sufficient details and advise us if there are any changes between now and July 2nd, 2017.

Detach this section and keep for your information

✂

✂

✂

✂

***Please note : It is important to specify wether there is a risk of anaphylactic shock due to an allergy reaction.***

1. Do you have any allergies (e.g., food, anaphylactic, medication, environmental)? Yes  No 

Details:

1. Are you receiving any medical treatment for your allergies? Yes  No 

Please, provide pertinent details related to treatment to inform personnel at the Université de Moncton:

1. Are you currently taking any medication? Yes  No 

Details:

1. Please provide details about any health or physical-related concerns (e.g., dietary requirements, diabetes, mobility, vision, or auditory). To ensure we can better meet specific requirements, it is essential that you provide us with any changes in your child’s health or physical-related concerns between now and the beginning of the student summer program start date.

1. New Brunswick Medicare # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Private Health Insurance Carrier and Policy # \_\_\_\_\_\_\_\_\_\_\_\_\_ Expiry Date (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent’s/Legal Guardian’s Authorization**

I understand the financial investment for a seat in this program and **the importance of completing the entire session**. My child is willing to participate fully in the Summer French Program from July 2nd to 28th, 2017. I have discussed proper conduct with my child as well as the importance of speaking French at all times. We understand that inappropriate behaviour or repeated use of English will be a breach of conduct and could mean being asked to leave the program. Should this situation arise, I understand I will be informed and be responsible for return transportation arrangements and incurred costs. Detailed behavioural expectations will be provided to students who are accepted to the program.

I authorize my child to participate in the full activities of the Summer French Program. In the event that my child is involved in an accident or becomes ill, I agree, that having taken the necessary precautions, the Université de Moncton, the Province of New Brunswick and its employees shall not be held responsible. This would also apply to the loss of or damage to his/her personal property.

In the event of an accident or illness, I understand that the Université de Moncton will phone me or one of the contacts provided on the registration form. If none of us can be reached, I hereby give permission to the Université de Moncton to authorize, on my behalf, all procedures, including admission to hospital and necessary treatment therein, as may be deemed essential for the care and well-being of my child.

**It is Mandatory that this form be signed by the parent / guardian of the participant.**

Name Relation to participant

Address (if different from above)

Street Address or P.O. Box \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

City, town or village Prov./Terr. Postal Code

Telephone: Home (506) Work (506)

 Signature Date