



# Joseph Pfeifer Kiwanis Camp

5512 Ferndale Cutoff \* Little Rock, Arkansas 72223

Phone (501) 821-3714 \* Fax (501) 821-2629

Email: [camp@pfeifercamp.com](mailto:camp@pfeifercamp.com)



Dear Principals, Assistant Principals, Counselors, and Teachers,

We are excited to be preparing for another year of the Alternative Classroom Experience at Joseph Pfeifer Kiwanis Camp. The program is sponsored by the Little Rock, Pulaski County, and Jacksonville North Pulaski School Districts, the Downtown Kiwanis Club of Little Rock, and several private foundations. Included in this packet are master copies of the parent and school forms that you can copy to begin the recruitment process. These forms are also available for download from the camp's website, <http://www.pfeifercamp.com>.

**We are now accepting applications for all 3<sup>rd</sup>, 4<sup>th</sup>, and 5<sup>th</sup> grade students.** As you know, slots fill on a first-come, first-served basis, so please do not delay if you wish for your students to participate. To enroll a student, we must have a Statement of Needs form completed by the teacher and a two-page Registration Form completed by the parent.

Also included with this letter is a packet of information that can be copied and distributed to your teachers to get them started on identifying those students they feel would benefit from the program. If you have any questions, please call the camp at 501-821-3714.

## About Pfeifer Camp

The Pfeifer Camp Alternative Classroom Experience is a prevention program for students who are not reaching their full potential in your classroom. We say these students are "at-risk," and we try to help them live their lives more responsibly. You and the teachers are the key to identifying those students who will thrive from our program. As educators ourselves, we know how involved you get with your students. Although no one can predict with certainty which children may eventually get pregnant, drop out of school, do drugs, or commit suicide, the classroom teacher or other school personnel often see early warning signs, sometimes as early as kindergarten or 1<sup>st</sup> grade.

The children of Pfeifer Camp come in all colors and from all backgrounds. Living together as a big "family," students learn how to respect oneself and others, how to work together, and how to behave responsibly. Students leave the program knowing that Pfeifer Camp is a safe and special place that can be considered as their "second home."

Self-esteem, motivation, and grades all go up at Pfeifer Camp – not miraculously but through a lot of hard work and late hours. Students must perform, and unlike regular classroom teachers, we have some unique and significant tools to help students properly perform academically and behaviorally. For example, we have no big, yellow school bus to whisk children away from schoolwork. Also, we have lots of fun and wonderful things to do at camp – if you get your work done!!! Another advantage is that parents must attend the parent workshops at the camp or risk having their child dismissed from the program.

We only have five classroom weeks to work with your student(s) (only four weeks for 3<sup>rd</sup> grade), so please choose the one(s) who will benefit the most. The prime candidate for Pfeifer Camp may be the student whose parents are getting divorced, the one with low self-esteem, or the one who does not deal with his anger very well.

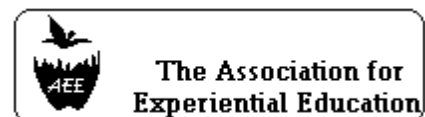
Thanks again and we look forward to another wonderful year of working with your students.

Sincerely,

Sanford Tollette  
Executive Director  
Pfeifer Kiwanis Camp

Binky Martin-Tollette  
Assistant Director  
Pfeifer Kiwanis Camp

Project of the Downtown Kiwanis Club





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## Procedures for the Alternative Classroom Experience

### Student Characteristics

Referrals will be accepted for students from the Little Rock and Pulaski County School Districts that fit the definition of youth-at-risk based on the following characteristics:

- Poor to marginal peer group and/or adult relationships
- Poor to marginal grades
- Poor to marginal self-esteem and self-concept
- Sporadic school attendance/tardiness
- Poor to marginal problem solving skills (i.e. prone to arguing/fighting)
- Moderate learning difficulties (excluding special education and emotionally disturbed students)
- Stressful environmental background (including but not limited to single parent homes, foster care, abuse and abandonment)
- Family History of violence, drug use, teen pregnancy, and/or crime

**Special Note:** ACE is for students who have the potential to learn and to behave appropriately in the regular classroom setting and is **not designed** for emotionally disturbed or learning disabled students. Enrollment for students with special concerns will be evaluated on an individual basis.

### Enrollment Process

School personnel including teachers, counselors, and principals should first identify potential candidates based on the above criteria. Slots are filled on a first-come, first-served basis with regard to district, age, race, gender, and determined need. First-come, first-served means that we must have the two-page Parent Registration Form and the teacher's Statement of Needs Form at the camp before a child can reserve a slot for the program. Also, priority will be given to those parents who attend the Initial Parent Meeting held the Tuesday prior to the beginning of each session. If a child's parent fails to attend the Initial Parent Meeting, even if the child has a slot reserved, that child can lose his/her slot to another child on the waiting list whose parents did attend the meeting. After the slots are confirmed, we will contact the schools and parents with students set to attend to make sure we have received all of the necessary information. (Please see the ACE Enrollment Checklist for a list of necessary student information.)

### After ACE

During the student's first week back at the regular school, someone from the camp staff will be making daily visits to your school to meet with the teacher and observe the student to monitor the student's return to the regular classroom. During this week, the camp staff will bring the following information to the school to give to the child's teacher:

**ACE Report Card:** When students return to their regular classrooms after ACE, they will bring a report card with a letter grade and percentage for each subject which represents five weeks worth of grades. These grades must be averaged into the nine weeks grading period indicated.

**Daily Report Form:** All teachers must complete a very simple daily report form on each student each day during their first week back in the regular classroom. Teachers should indicate the student's behavior for the day by marking "poor," "fair," "good," or "excellent." This helps us to understand which children we need to focus on as still having problems in the classroom. Also, teachers should indicate whether or not the student had all of his/her assignments completed.

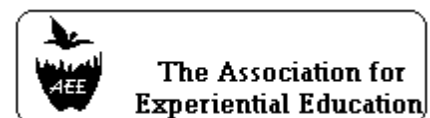
**Academic and Behavioral Assessment:** In addition to the report card, each student's teacher will receive a summary of the student's performance during the session with input from all direct care staff. Areas assessed are classroom performance, cabin and social concerns, recommendations and noteworthy incidents.

**Copy of Informed Consent for Release of Records:** To ensure that a copy of the informed consent for release of records is placed in each student's permanent file, we will send a signed copy to the primary contact person at each school. Again, please place this in the student's permanent record file.

**Follow-Up Guidelines:** All ACE graduates are eligible for continuing services and referrals through completion of the 8<sup>th</sup> grade.

**Summer Camp:** All ACE graduates are eligible to apply for the free summer camp program and are chosen on a first come first served basis and may be eligible to be a counselor in training (CIT) at age 15.

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## ACE ENROLLMENT CHECKLIST

The Alternative Classroom Experience (A.C.E.) is a 30-day residential, educational, and wilderness experience for 3<sup>rd</sup>, 4<sup>th</sup>, and 5<sup>th</sup> grade students who are not performing up to their full ability academically, behaviorally, or socially. This prevention program provides a highly structured classroom with certified teachers. Besides academics, campers learn problem solving skills, crisis management skills, and acceptance of personal responsibility through a variety of outdoor, environmental, and team-building activities. Other components of the program are mandatory weekly parenting workshops, a transition period where students are monitored upon return to their regular classroom, and long-term follow up through the completion of 8th grade.

### To reserve a slot:

Slots are reserved on a first-come, first-served basis with regards to race, gender, and grade. We will limit initial enrollment to 5 students from any one school per session. The following forms must be completed and returned to the camp in order for a slot to be reserved.

- ❖ Parent Registration Form (two pages): *Completed by parent.*
- ❖ Statement of Needs Form: *Completed by teacher.*

### Additional required information from school:

- ❖ Copy of Permanent Record Folder/Card (including last year's grades and attendance)
- ❖ Immunization Records: Please copy from student's file
- ❖ Copy of Birth Certificate
- ❖ Copy of Social Security Card

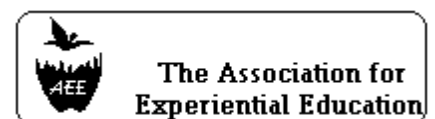
### Additional required information from parent:

- ❖ Camper Health Forms (three pages)
- ❖ Physical form (4<sup>th</sup> page of Health Form) signed by physician or nurse practitioner within the last year. Signed physician statement can also be on clinic's form.

### To secure the slot:

The parent (or other family member) must attend the Initial Parent Meeting held the Tuesday prior to the beginning of each session at the camp. Once your student has secured a slot in the program we will contact you and the parent to make sure all information has been received. Please stress that camp must have a copy of a current physical in order for the child to stay at camp on the registration day.

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**ACE STATEMENT OF NEEDS \*confidential\***

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_ Last Name \_\_\_\_\_ Grade \_\_\_\_\_

Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Race \_\_\_\_\_ Gender \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_

School \_\_\_\_\_ Teacher \_\_\_\_\_ School ID # \_\_\_\_\_

**Identifying Characteristics:** Please rate the student as compared to his/her peers in the classroom (1 = Poor and 5 = excellent)

	<u>Poor/Low</u>			<u>Excellent/High</u>	
Academic Performance in the classroom	1	2	3	4	5
Behavioral Performance in the classroom	1	2	3	4	5
Self-Esteem	1	2	3	4	5

**Please check any areas of concern:**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Peer to peer relationships | <input type="checkbox"/> Child to adult relationships | <input type="checkbox"/> Attitude toward school |
| <input type="checkbox"/> Parent involvement         | <input type="checkbox"/> Self-confidence              | <input type="checkbox"/> Self-motivation        |
| <input type="checkbox"/> Communication skills       | <input type="checkbox"/> Ability to concentrate       | <input type="checkbox"/> Self-control           |
| <input type="checkbox"/> Maturity for age           | <input type="checkbox"/> Responsibility               | <input type="checkbox"/> Completes schoolwork   |

**To the best of your knowledge, please check all that apply to the student's family and school history:**

- |   |  |  |  |
|---|--|--|--|
| <input type="checkbox"/> physical abuse     | <input type="checkbox"/> gang activity by child                | <input type="checkbox"/> weapon use by child                       | <input type="checkbox"/> death of parent/sibling   |
| <input type="checkbox"/> emotional abuse    | <input type="checkbox"/> gang activity in family               | <input type="checkbox"/> weapon use by family                      | <input type="checkbox"/> suicide in family         |
| <input type="checkbox"/> sexual abuse       | <input type="checkbox"/> substance abuse by child              | <input type="checkbox"/> has been suspended before                 | <input type="checkbox"/> divorce in family         |
| <input type="checkbox"/> neglect            | <input type="checkbox"/> substance abuse in family             | <input type="checkbox"/> has been retained before                  | <input type="checkbox"/> teen pregnancy in family  |
| <input type="checkbox"/> poor appearance    | <input type="checkbox"/> sudden drop in grades                 | <input type="checkbox"/> changes schools frequently                | <input type="checkbox"/> sudden change in behavior |
| <input type="checkbox"/> foster care        | <input type="checkbox"/> professional counseling               | <input type="checkbox"/> psychological evaluation                  | <input type="checkbox"/> residential/day treatment |
| <input type="checkbox"/> single parent home | <input type="checkbox"/> has been physically abusive to others | <input type="checkbox"/> had to be physically restrained at school |  |

**Please describe the student's current abilities and/or needs in the following areas:**

I. Academic:

II. Behavior:

III. Social/Self-Esteem:

**Please describe any special services or testing that the child has been involved in, ie: 504's, modified work load or resource:**

**Additional comments, concerns, or information:**

\_\_\_\_\_  
 Teacher's Signature

\_\_\_\_\_  
 Date

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