Philadelphia Watershed Stewardship Program
Application Packet

2020 Enrollment is Now Open. Apply today!
Philadelphia Watershed Stewardship Program
The Philadelphia Watershed Stewardship (PWS) program empowers young people to become stewards: change makers, ecologists, scientists, urban planners and leaders.

Stewards study urban ecology in the field to learn about the preservation and protection of the Darby-Cobbs Watershed firsthand. PWS is led by the LandHealth Institute, in partnership with the Philadelphia Water Department and Fairmount Park Conservancy.

Early Days at the Watershed
More than one hundred years ago, in the early 20th century, Cobbs Creek Park and Morris Park preserved hundreds of acres of open space and saved Indian Creek from being buried in an underground sewer, as were many Philadelphia creeks at the time.¹

While Philadelphia continued its path to industrialization, polluted stormwater runoff and inadequate drainage systems took a toll on the quality of life in and around the watershed. PWS is central to collaborative city efforts to improve the health of watersheds.

Philadelphia’s Green Infrastructure
It is the mission of three public organizations working together (local/ state/federal)— the Philadelphia Water Department, the Pennsylvania Department of Environmental Protection, and the United States Environmental Protection Agency— to advance green infrastructure for urban wet weather pollution control.

This partnership, Green City, Clean Waters (GCCW)², defines the way we think about stormwater. GCCW recreates living landscapes that once slowed, filtered, and consumed rainfall by adding green to our streets, sidewalks, roofs, schools, parks, and parking lots so that rivers and streams are swimmable, fishable, and drinkable on a level exceeding our expectations.

¹ Levine, Adam. Philly H2O: Cobbs Creek Watershed History. 10 Nov. 2010.
² Green City, Clean Waters | Philadelphia Water Department, 2017
Stewards have the honor of being given the responsibility to help Philadelphia realize these goals. By educating themselves and the public about how we can all protect and promote the health of our watersheds, stewards become ambassadors for the future of our city.

Who is Eligible to Apply?

Students who are currently in grades 9-11 attending high school in Philadelphia in are eligible to apply for PWS 2020. The program runs from April through November 2020.

Timeline:

**December 2019 Application window opens**

**January 2020** First round of selections made

March 2020 Application window closes

April 2020 First training session* (1x/week for ten weeks)

May-November 2020 events and community engagement projects

Stewards are eligible to receive a $500 stipend based on participation and performance.

*first session will be held at Cobbs Creek Community Environmental Center, 700 Cobbs Creek Parkway (Cobbs Creek Parkway and Catherine Street).

The program is field-based. Each week, as weather allows, stewards are outside learning about—
- local environmental and industrial history of Cobbs Creek
- regional plants and animals
- pollution sources
- green infrastructure

From July through November, stewards participate in PWS-sponsored events and community engagement projects, including:
- kayaking (John Heinz National Wildlife Refuge)
- bicycle tour of Green Stormwater Infrastructure (Neighborhood Bike Works)
- participation in Coast Day (Partnership for the Delaware Estuary)

Equal Opportunity Enrollment

PWS is open to all qualifying applicants without regard to race, gender identification, sexual orientation, religion, or immigration status.

Expectations and Outcomes

Stewards are are expected to:

- understand and explain concepts of urban ecology
- actively participate in PWS training sessions and in PWS-affiliated events
- engage in and facilitate community projects
- demonstrate courtesy, respect, and empathy

Stewards come away with:

- an invaluable experience in field ecology
- multiple opportunities to practice and strengthen public speaking
- a foundational understanding of urban water management issues
- a deep grasp of the urban environment

As explained by one of our 2018 stewards: “...to hike across some cool streams right in the heart of the city. I think that surprised a lot of [us]. The coolest part for me was always the wildlife, and the insects and stuff of the wooded areas and parks we would explore. I really enjoyed sharing what our experiences were with the community, and our families at the end of the school year; the program really captured us doing some amazing things...especially catching fish at Bartram’s Gardens. You can learn a lot from reading about the environment and the ecosystems, but learning while you’re right there in it is 100x’s better and really makes a better impact on wanting to preserve it.”

How to Apply

Complete and submit all forms in this packet by April 1st, 2020 to Land Health Institute’s Program Manager, Dan Kobza, at daniel@landhealthinstitute.org or by mail:

614 S. 4th Street #341
Philadelphia, PA 19147

Approach a teacher, counselor, coach, or other adult (a non-family member) for a letter of recommendation stating why you are a good fit for PWS. The letter should be sent directly to Dan Kobza at daniel@landhealthinstitute.org, or mailed to the above address.
Optional: a **resume** that attests to your fit for PWS. Resume resources are listed below.

Applicants who submit by December 15, 2019 will be eligible for early decision, and will be notified by January 31, 2020.

**Application Checklist**

**Required**

- [ ] Enrollment Form (signed)
- [ ] Statement of Interest
- [ ] PWS Waiver (signed) – Acknowledgement of Program Participation Release of Liability and Consent to Media Depiction
- [ ] Medical Information Form
- [ ] **Letter of Recommendation:** Please ask a teacher, guidance counselor, coach or other adult in your life to provide a closed letter of recommendation that tells us why you’d be a good fit for PWS. Letters should not be included in this packet, but instead sent directly to Dan Kobza (daniel@landhealthinstitute.org).

**Optional**

- [ ] **Resume:** You may include a resume as part of your application to highlight your experiences and qualifications for consideration in our selection process.

**Resume Resources**

- [Easy Resume Builder](#)
- [High School Resume Examples and Writing Tips](#)
  [Sample Resume for High School Students](#)

**Enrollment Form**

Please sign below to indicate that you have read and understand the material in the application packet. If you have additional questions, contact Program Manager Dan Kobza, daniel@landhealthinstitute.org.

____________________________________________________________________________________

*(Please copy these documents for your records and submit the originals)*
I ______________ have read and understand the information in this application packet.

Signature: ___________________________ Date: ___________________________

Phone: ____________________________________________________________________

Email: ____________________________________________________________________

Statement of Interest

This is your chance to let us know why you would be a good fit for PWS. Get creative— you can write an essay, submit a video, speech, record a podcast, create artwork,... it’s up to you. However you choose to communicate your fit for PWS, answer the following questions:

How do you feel about spending time outdoors?
PWS takes place outside. If you already spend time in the outdoors, tell us about it. If you want to spend time outside, tell us what you’d most like to do. Let us know how you feel about critters and plants.

How do you feel about being involved in your neighborhood?
Stewards interact with the public as part of community engagement projects. Let us know if, and how, you’re already involved in your community. If not, let us know what sort of community engagement you’d be most excited about, and why.

How do you feel about the planet?
How do you think human activity is impacting the planet? What makes you think so?

If selected as a steward, what three things would you be most excited to learn about, and why?

Is there anything else you’d like to share with us?

PWS Waivers and Medical Information Forms

I understand that during my participation in the Philadelphia Watershed Stewardship Program (PWS), I may be exposed to a variety of hazards and risks, foreseen or unforeseen, which are inherent during the PWS program and any associated outings and cannot be eliminated without destroying the unique character of the program. These inherent risks include, but are not limited to, the dangers of serious personal injury, property damage, and death from exposure to the hazards of travel. The Land Health Institute in conjunction with the City of Philadelphia, acting through its Water Department (the “City”), has not tried to contradict or minimize my understanding of these risks. I know that injuries and damages can occur by natural causes or
activities of other persons, animals, trip members, trip leaders and assistants or third parties, either as a result of negligence or because of other reasons. I understand that risks of such injuries and damages are involved in the PWS program and I appreciate that I may have to exercise extra care for my own person and for others around me in the face of such hazards. I further understand that for the duration of the program, there may not be rescue or medical facilities or expertise necessary to deal with the injuries and damages to which I may be exposed. In consideration for my acceptance as a participant in this program, and the services and amenities to be provided by the Land Health Institute in connection with the program, I confirm my understanding that:

• I acknowledge my participation is at the discretion of the Program Director and Manager.

• I am personally responsible for all risks associated with the travel to and from the program.

• If I decide to leave early and not to complete the program as planned, I assume all risks inherent in my decision to leave and waive all liability against the Land Health Institute and the City arising from that decision. Likewise, if the Program Director or Manager has concluded the program, and I decide to go forward without the Program Director or Manager, I assume all risks inherent in my decision to go forward and waive all liability against the Land Health Institute and the City arising from that decision.

• This agreement is intended to be as broad and inclusive as is permitted by law. If any provision or any part of any provision of this Agreement is held to be invalid or legally unenforceable for any reason, the remainder of this agreement shall not be affected thereby and shall remain valid and fully enforceable.

• To the fullest extent allowed by law, I agree to WAIVE, DISCHARGE CLAIMS, AND RELEASE FROM LIABILITY the Land Health Institute and the City of Philadelphia, its contractors, officials, departments, agencies, agents, representatives, boards, commissions, employees, successors, assigns and volunteers from any and all liability on account of, or in any way resulting from injuries and damages, even if caused by negligence of the Land Health Institute, its officers, directors, employees, agents, and leaders, in any way connected with this program. I further agree to HOLD HARMLESS the Land Health Institute and the City of Philadelphia, its contractors, officials, departments, agencies, agents, representatives, boards, commissions, employees, successors, assigns and volunteers from any claims, damages, injuries or losses caused by my own negligence while a participant in the program. I understand and intend that this assumption of risk and release is binding upon my heirs, executors, administrators and assigns, and includes any minors participating in the program.

• I have read this document in its entirety and I freely and voluntarily assume all risks of such Injuries and Damages and notwithstanding such risks, I agree to participate in the program.

• I have read and understand this liability policy.

I further grant permission for my image, voice and written words to be recorded and reproduced, without compensation, in print, television, electronic, digital and sound media related to my participation in the PWS program, and that the City shall have all rights to the results and proceeds of such taping, photography and recording, including without limitation
the right to use or license to others, in any manner, all or any portion thereof or a reproduction thereof throughout the world an unlimited number of times in perpetuity, for any purposes whatsoever, in medium now or hereafter in existence.

Name:__________________________________________________________________________

Signed:___________________________________  Date:______________________________

If you are a minor (under age 18), your parent or legal guardian must also sign this Agreement on your behalf.

I hereby agree and consent to the foregoing Agreement on behalf of the minor below.

Name ____________________________  Age of Minor:________________________

(Please Print full name):__________________________________________________________

Signature of Parent or Guardian: Date:____________________________________________

Daytime Phone # __________________________________________  Evening Phone #____________

Emergency Contact name ___________  Phone number _____________________________

Health Insurance ______________________  Policy # _________________________________

Doctor ____________________________  Contact information _________________________
# Watershed Stewards Program
Participation Registration / Waiver

## Personal Information:

<table>
<thead>
<tr>
<th>Participant’s First and Last Name:</th>
<th>Age:</th>
<th>Sex:</th>
<th>DOB:</th>
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<tbody>
<tr>
<td>Participant’s Address:</td>
<td>City:</td>
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<td>Zip:</td>
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<td>Participant’s School:</td>
<td>Grade:</td>
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<td>Participant’s Home Phone:</td>
<td>Participant’s Cell Phone (if applicable):</td>
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## Parent/Guardian Information:

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<th>First and Last Name:</th>
<th>Relationship:</th>
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<td>Address (if different from participant)</td>
<td>City:</td>
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<td>Home Phone:</td>
<td>Cell Phone:</td>
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<td>email:</td>
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## Emergency Contact Information:

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<th>Emergency Contact 1:</th>
<th>Emergency Contact 2:</th>
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<tr>
<td>Relationship:</td>
<td>Relationship:</td>
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<td>Home Phone:</td>
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<td>Cell Phone:</td>
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# Watershed Stewards Program Registration / Participation Waiver

## Medical Information:

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<th>Physician's Name:</th>
<th>Physician's Phone Number:</th>
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<th>Medical Insurance Carrier and ID number:</th>
<th>Policyholder's Name:</th>
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<th>Preferred Hospital:</th>
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<th>Limitations/Restrictions (activity or diet)</th>
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<tr>
<th>Any medical conditions we should be aware of? Allergies? Asthma?</th>
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<tr>
<th>Is participant taking any medication we should be aware of? If yes, please list below.</th>
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<td>Medication: Dosage: Time:</td>
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<td>Medication: Dosage: Time:</td>
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## Emergency Clause:

In the event that I cannot be reached in an emergency, I hereby give my permission to LandHealth Institute's Watershed Stewards program leaders to secure proper medical care for my child as deemed necessary. This permission extends from minor first-aid treatment to hospitalization.

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<th>Signature of Responsible Party:</th>
<th>Relationship:</th>
<th>Date:</th>
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