

Knob Noster School District *FIRST*[®] LEGO[®] League Team



In September 2018, the Knob Noster School District and Stealth Panther Robotics Team launched an opportunity for students to compete in the *FIRST*[®] LEGO[®] League competitions (<http://firstlegoleague.org>).

We are looking for motivated and team-oriented students interested in taking their Robotics skills to the next level. FLL teams compete on three fronts:

1. **Robot Game** – design, build and program a robot to autonomously complete a series of missions around each year's new theme. (<http://www.firstlegoleague.org/challenge>)
2. **Project** – identify a problem, research/develop an innovative solution, and create an entertaining presentation of your work
3. **Core Values** – demonstrate teamwork and the other FLL Core Values (<http://www.firstlegoleague.org/mission/corevalues>)

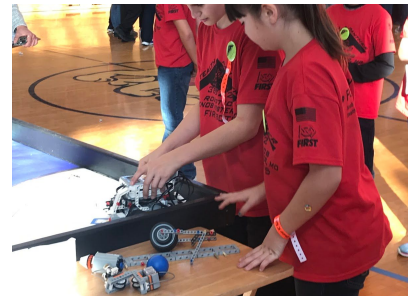
The team will set their meeting times up to two times each week. Additional meetings may be added as the season progresses.



The team will run at as long as a team is in contention; December for the Regional Qualifier, or January for the State Championships.

Here are some things to keep in mind if you are considering applying to be on the FLL team for Knob Noster School District:

- FLL's Core Values (<http://firstlegoleague.org/mission/corevalues>) stress teamwork, so you must be committed to work with others to find compromise and be able to give and receive positive/constructive feedback as your team develops their solutions – you must be a **team player**
- Your ability to work hard as part of team to complete whatever task needs to be addressed is essential – you must be **flexible**
- Regular attendance at the team meetings is vital – you must be **reliable**
- Some work outside of meeting hours will be required (research, preparation, competitions) – you must be **committed**
- This is a team, so you will be expected to bring some skills to the team in at least one of the competition areas– you must be **experienced**
- Students do all the work at FLL, so you will be expected to multi-task and take on responsibilities outside of your comfort zone – you must be willing to **grow**
- You will be representing your school at the team competitions, so your behavior must be exemplary at all times – you must be **mature**



If this sounds like a challenge you are prepared to take on, please work with your parent/guardian and teachers to complete this application by Wednesday, May 1, 2019, and return it to the school office.

If you have any questions, please contact Ruth Adams at radams@knobnoster.k12.mo.us.



Knob Noster School District *FIRST*[®] Stealth Panther Robotics 2019/2020 PROGRAM APPLICATION FORM

READ THIS FORM CAREFULLY AND FILL IT OUT IN ITS ENTIRETY – PLEASE PRINT INFORMATION. USE ONLY BLUE OR BLACK INK

Student Information

Participant Name: _____ Gender: M _____ F _____
(Last Name) (First Name) (M.I.)

Age: _____ Date of Birth: ____/____/____ Grade: _____ Student's allergies: _____

School Attending: _____ Teacher: _____

T-Shirt Size (please circle one): **Youth** - XS S M L XL **Adult** - XS S M L XL XXL

FORMS MUST BE COMPLETED AND SIGNED BY CUSTODIAL PARENT OR LEGAL GUARDIAN

PLEASE INCLUDE BOTH PARENTS/GUARDIANS IF APPLICABLE

Parents/Guardians _____ Relationship to Student _____

Address _____
(Number and Street) (Apt. #)

City: _____ State: _____ Zip: _____ Home Phone _____

Email address: _____

Mom Cell # _____ Dad Cell# _____

Mom Work# _____ Dad Work # _____

(Please note: We **MUST** have **WORKING** telephone numbers where someone can be reached between the hours of 3:00 p.m. and 5:30 p.m. or your child may not be allowed to enter the program.)

Emergency Contact Name and Phone Number: _____

Physical limitations/medical needs/special needs of participant: _____

Regular Day Teacher name(s) or Team Name: _____

Release Information

In consideration for my child's participation in the Afterschool program....

I _____ (Parent/Guardian) give permission for my child to:

- Be photographed and allow KNSD or Stealth Panther Robotics to release any pictures for publicity and educational purposes
- Use technology/Internet, under SUPERVISION, for educational purposes only in accordance with KNSD technology policy
- Complete pre- and post- surveys for data collection for the KNSD FIRST Robotics Programs.



FIELD TRIP PERMISSION SLIP PARTICIPANTS

By signing on the line below, you agree that your child can go on field trips while they are participants in the FIRST Robotics program. These field trips can be either on or off campus. You will receive detailed information prior to the trip, but you will not be required to sign another permission slip.

I give permission for my child, _____, to attend any FIRST Robotics Program class field trip during the 2019-2020 school year.

In the event of an emergency and we cannot be reached, we also give our consent for the school to obtain, through a physician or hospital of its choice, such medical care as is reasonably necessary for the welfare of the student.

Parent/Guardian Signature: _____

Extended Day Transportation Information

We *MUST* have the name(s) of anyone authorized to pick your child up or we cannot release them. Remember that a *photo I.D.* will be required when children are picked up.

_____ Arrangements will be made for my child to be **picked up at school** by: _____
(Parent/guardian name)

OR

_____ My child will _____ to _____

He/she will be picked up by one of the listed contacts. I understand the importance of being on time to pick my child and will make every effort to be there before practice is over.

**Contacts authorized to pick up child if parents cannot be reached.
CONTACT MUST BE SOMEONE OTHER THAN THE PARENTS.**

Alternate #1 Contact _____ Relationship to Student _____

Home Phone _____ Cell Phone _____

Work Phone 1 _____ Work Phone 2 _____

Alternate #2 Contact _____ Relationship to Student _____

Home Phone _____ Cell Phone _____

Work Phone 1 _____ Work Phone 2 _____

I fully understand what is expected of my child and me and have no further questions.

Parent/Guardian Signature: _____

Date: _____



FLL STUDENT/PARENT CONTRACT

In order to ensure that parents and students understand the responsibility and commitment needed by each FLL member, please take the time to read over and sign this contract with your child. Please initial each line and sign the form.

FIRST Core Values

We express the *FIRST* philosophies of Gracious Professionalism and Coopertition through our Core Values:

Discovery: We explore new skills and ideas.

Innovation: We use creativity and persistence to solve problems.

Impact: We apply what we learn to improve our world.

Inclusion: We respect each other and embrace our differences.

Teamwork: We are stronger when we work together.

Fun: We enjoy and celebrate what we do!

STUDENT CONTRACT (please check each item you can honestly agree to)

_____ I realize that no FLL problem has only one solution, and that a successful team is one which cooperates by considering EVERYONE'S solution and ideas. I will not criticize anyone's ideas.

_____ I agree that my behavior at meetings and tournaments will be constructive.

_____ I agree that each FLL team meeting is valuable and I will attend each meeting as best as I can. If a conflict arises, I will notify my coach in advance in writing.

_____ I agree to cooperate on whatever solution the team chooses, even if it is not my first choice.

_____ I agree that all solutions, including props, costumes, signs, etc. will be made completely by me or a member of my team.

_____ I understand that the FLL program recognizes all teams bringing a solution to an expo, qualifier, or regional tournament are considered 'winners'. I agree to show other teams the utmost respect and display good sportsmanship at all times.

_____ I agree that the goal of my team should be to do our best to solve a challenging problem.

_____ I agree that this program is a privilege not a right and I must uphold the Core Values of FIRST at all times

Signature of team member _____ Date _____

PARENT CONTRACT

_____ I agree, in the proper spirit of FLL, not to interfere with the team's solutions. All creations, inventions, ideas, must come from the team members.

_____ I agree to make every effort to have my child attend every team meeting. If there is a conflict, my child will notify coach in writing and I will initial the coach as soon as possible. I will send a message in remind confirming my child's absence. I understand that my child has a commitment to his/her team.

_____ I realize that my child's coaches will be contributing a significant amount of time and effort to provide a rewarding experience for the team. I will try to be cooperative and helpful as possible.

_____ I agree that this program is a privilege not a right and my child will be held accountable to all of FIRST Core Values

_____ I agree to discuss all items listed above with my child.

Signature of team parent _____ Date _____



Parent Volunteer Information (Optional)

Student's Name: _____

Parent 1 Information

Name: _____

Cell Phone: _____

Email: _____

Parent 2 Information

Name: _____

Cell Phone: _____

Email: _____

I/We are interested in helping out by (please check all that apply):

- Providing team meals
- Providing funding for team meals
- Providing engineering/CADD mentorship
- Providing business/marketing mentorship
- Providing sponsorships
- Booster club
- Being on special events planning committees
- Donating materials and supplies (tools, consumables, etc.) please list: _____
- Other suggestions: _____



Stealth Panther Robotics FIRST Lego League Student Application

Name:

School:

Why do you want to be on an FLL team?

Do you have previous experience being on a team (any type)? Please explain.

What do you think might be the most enjoyable part of being a member of an FLL team?

What is the most important personal skill or interest you believe you could offer a team?

What is your favorite subject in school? Describe how you best learn a new subject?

What does it mean to you to be a member of a team?

