



CAMP GIZMO: TEAM LEADER APPLICATION PACKET

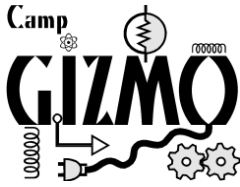
Assistive technology is the key to providing children with disabilities greater participation in activities of life at home, school and community. **CAMP GIZMO** is a five-day, hands-on summer camp where parents, professionals, and students learn how assistive technology can help young children birth through eight (8) years of age with significant and multiple developmental needs.

CAMP GIZMO is held on the campus of the WV Schools for the Deaf and Blind in Romney, WV and participants are housed in the dorms on campus. During the day, a variety of training opportunities are provided for educators and parents while all children participate in KIDs Camp under the supervision of qualified staff. All participants and staff may bring their children.

A limited number of “focus” families are selected to attend camp and assigned to a team of professionals who help families identify and apply new strategies for solving their multiple assistive technology needs. Team leaders are the key to ensuring that the families have a successful and beneficial experience at camp. Responsibilities of the team leader include working with the family prior to attending camp to facilitate their camp arrival and prepare the family for camp activities and expectations. The team leader will be expected to coordinate all activities for the family and ensure that other team members are involved in the process. Daily staff meetings are held so that team leaders may share information and discuss any pressing issues in addition to daily team meetings.

CAMP GIZMO is held annually in July. This is a wonderful professional and training opportunity. If you are interested in applying for a team leader position, please complete the attached application. Questions may be directed to LeAnn Murray (lmurray@rvcds.org) WV Early Childhood Training Connections and Resources, 304/529-7603 or 888/983-2827.

Thank you



Camp GIZMO Team Leader Application

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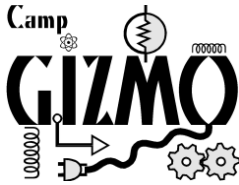
CONTACT INFORMATION

| | | |
|--|--------------------------|-------------|
| I. Applicant's Information: | | |
| Last Name: | First Name: | |
| Title: | Agency (if appropriate): | |
| Address: | | |
| Home Phone: | Work Phone: | Cell Phone: |
| Email: | | |
| Will you participate as: <input type="checkbox"/> an individual/consultant OR <input type="checkbox"/> supported through an agency | | |

I understand that if I am selected as a Camp GIZMO Team Leader I will be responsible for the following:

- ✓ Planning for Annual Camp Staff
 - Complete and return Camp Gizmo Interest Letter by date set
 - Complete and return Camp Gizmo Application packet by April 30
 - Attend the selection of families meeting in May (if available)

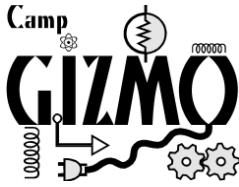
- ✓ Planning for Focus Families
 - Contact assigned families within two weeks of receiving assignment to conduct a family interview using the Team Leader Questionnaire
 - Emailing completed Team Leader Questionnaire with one week of completing interview
 - Identify unique circumstances and alert Team Liaison of these circumstances



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- Notify Team Liaison and Camp Coordinator if unable to contact assigned family within two weeks of assignment so follow up can be completed by Team Liaison and/or Camp Coordinator
 - Respond to correspondence from the Team Liaison and Camp Coordinator within 48 hours of correspondence
 - Respond to contact from Focus Family within 48 hours of contact
- ✓ Staff Meetings
- Attend opening Staff Meeting and be prepared to share a brief overview of focus child and family
 - Attend daily staff meetings and be prepared to share a brief overview of focus child and family and progress at camp
- ✓ Facilitation of Team Meetings
- Facilitate the team's daily meeting, coordinate class, lab and observation times and assure planned activities occur including the completion of the Family Notebook as outlined in more detail in the document "Roles and Responsibilities of Camp Gizmo Team Leaders"
- ✓ Facilitation of Child Participation in Camp Activities
- Evaluate with the team a child's ability to participate in camp activities and to make necessary modifications and adaptations
 - Complete a participation inventory, including pictures if appropriate, for each child as activities, equipment or assistive technology is tried and/or modified
 - Provide documentation of adaptations and/or modifications in the Family Notebook
- ✓ Facilitation of the Family Notebook
- Complete the Family Notebook with the assistance of team members as needed
- ✓ Ethics and Professionalism
- Respect the family's right to confidentiality and share only relevant information with camp staff as it regards to the child's developmental



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strengths and needs, what the action plan is for the week and progress toward the action plan

- Base all camp activities on the family's priorities and concerns for their child
- Be supportive of the child and family's team back home

Please complete the following information:

The best time to contact me is: _____

My best contact number is: _____

Can we contact you at work? Yes No

Please include a current resume with your application.

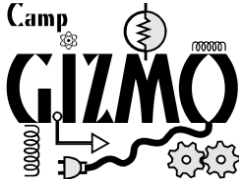
Please sign and date below.

Signature

Date

Please submit the entire packet (7 pages) and your resume to:

LeAnn Murray
WV ECTCR
611 Seventh Ave Suite 322
Huntington WV 25701
Email: lmurray@rvcds.org
Fax: 304/529-2535



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YOUR KNOWLEDGE AND SKILLS

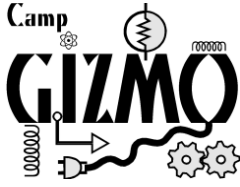
II. Describe your knowledge and skills in the following content areas where applicable to facilitate team assignments:

Infant and Toddler Development: (Describe your educational background and knowledge of infant and toddler development, how many years of experience do you have in providing services to infants and toddlers, in what capacity, and what settings?)

Preschool Development: (Describe your educational background and knowledge of preschool development, how many years of experience do you have in providing services to preschool age children, what capacity, and what settings?)

Experience with Children with Disabilities: (Describe any knowledge, coursework and/or training you have related to the implementation of evidenced-based practices for children with disabilities.)

Experience with Assistive Technology: (Describe any knowledge, coursework and/or training you have related to assistive technology and its use with children with disabilities.)



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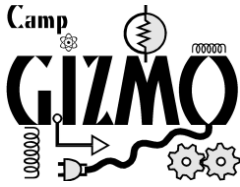
YOUR KNOWLEDGE AND SKILLS

Adaptations and Modifications: (Describe any knowledge, coursework and/or training you have related to the use of modifications, adaptations and assistive technology devices/equipment for assisting children to participate within their daily activities and routines in home and in community settings.)

Knowledge of Resources: (Please list local, state and national resources for families of children with disabilities that you are familiar with.)

Family Centered Practice: (Describe your definition of family centered practice, including how you incorporate families into your home visiting and/or preschool services.)

Routines Based Interview: (Describe how you gather information about a child/family's daily activities and routines, and challenges within those routines. Describe how you use the information gathered to plan for assessment or intervention.)



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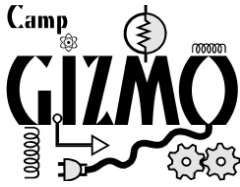
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YOUR KNOWLEDGE AND SKILLS

Teaming/Collaboration: (Describe your experience as a team member, knowledge of teaming principles, group process, communication, interagency collaboration, etc.)

OTHER

Now, what questions do you have about Camp Gizmo?



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REFERENCES

III. Professional/Practice References

Name, address, email address, phone number of each individual providing a reference must be provided. Contact may be sought in support of your request to be considered as a Team Leader.

1. Name:

Address:

Phone Number:

Email:

What does this person know about your professional experience?

2. Name:

Address:

Phone Number:

Email:

What does this person know about your professional experience?