





Sea Turtle Conservancy Action Ambassadors (STCAA) Application

This program was funded by a grant awarded from the Sea Turtle Grants Program. The Sea Turtle Grants
Program is funded from proceeds from the sale of the Florida Sea Turtle License Plate. Learn more at

www.helpingseaturtles.org

Program Description: Sea Turtle Conservancy at the Barrier Island Center on the Archie Carr Refuge is inviting applicants to join the STCAA program for 11-18-year-old students interested in environmental issues that will train students in the skills necessary to make real change in their communities through advocacy and stewardship. This is a school year program with required monthly meetings on the first Saturday of the month from 10 am to noon, (except for those that conflict with holidays or Spring Break). Additional bimonthly meetings will be scheduled as needed that will be organized during times the majority of the STCAA students are available. Likely meeting times will be after school, evenings and weekends. Some of the meetings will be in-person and some will be on Zoom so we can engage a broader range of mentors. Students will learn about the issues facing sea turtles and their habitats, select an issue to address, design a project and make a request for change with the goal of improving sea turtle survival and habitat quality. The program will use the impactful UF IFAS Community Action Projects for the Environment (CAPE) model. Read more about CAPE here: https://programs.ifas.ufl.edu/cape/.

Ten STCAA students will receive a \$300 stipend if they successfully complete the program and make a request for change in the community. The program runs from October through May. The in-person meetings will be at the Barrier Island Center, 8385 S. Highway A1A, Melbourne Beach, FI, 32951.

If you are interested, please **fill out the application** below and return to Sarah Rhodes-Ondi, STC Community Stewardship Coordinator, sarah@conserveturtles.org by September 19th.

Please also email Sarah **two letters of recommendation** from two different adults who know you but are not related to you. These can be from teachers, coaches and extra-curricular program supervisors. These letters can be emailed directly to Sarah with Letter of Recommendation and your name in the subject line.

Student Name		Birthdate:	Birthdate:	
Email:	Phone			
School or Homeschool		Grade		

Mailing Address	City
StateZip	
Parent NameF	Phone
Email:	
Emergency Contact Name (if different than parent)	
Emergency Phone	
MEDIA RELEASE is required for participation in this program. We will promote the student's project and the program. Do you agree to give permission to use photographs and video of your students participati Conservancy Action Ambassadors Program? This is a grant funded provideo helps tell our success story. Circle: Yes	Sea Turtle Conservancy ng in the Sea Turtle
LIABILITY RELEASE- Having been informed of the activity to provide syouth, having read the above program description, I, the parent/guar named, do hereby give my approval for participation in all of the activity program information packet. I assume all risks and hazards incidental activity, transportation to and from the activities, and I do hereby releand hold harmless Sea Turtle Conservancy and Brevard County, its agorganizers, and sponsors, any and all of them. In case of injury to the all claims against the organizers, the sponsors or any of the superviso likewise release from responsibility any person transporting the particular activities. I further agree to indemnify and hold harmless Sea Turtle County Parks & Recreation, the Brevard County Board of County Communicipalities, Charter Officers, Brevard County School Board and the any licensees of the aforementioned against any liability, loss, or other caused by or arising out of my, or the participant's, appearance on the utterance made by me, or the participant, on the program or the use for use by me, or the participant, on the program including reasonable fees. Brevard County Parks & Recreation and Sea Turtle Conservancy participant, to appear in their programs shall constitute its approval of Parent/Guardian Printed Name:	rdian of the participant vities as indicated in the to the conduct of the ease, absolve, indemnify, gents and employees, the participant, I hereby waive its appointed by them. I cipant to and from conservancy, Brevard imissioners, its eir agents and assigns and er injury whatsoever e program or any of any materials furnished e costs and attorneys' permitting me, or the
Parent/Guardian	Data
Signature:	Date:

Stude	ent Contract:			
		(printed student name) agree to		
Ambas from a the me	ssadors. I understand that if I am sick of attending meetings, I will notify the pro	etings of the Sea Turtle Conservancy Action or have another obligation arise that prevents me ogram organizers a minimum of 24 hours prior to d through regular meeting attendance, consistent month of May 2026.		
Studer	nt Signature	Date		
Paren	t Commitment:			
l,	(r	printed parent name) support my young		
	teen's participation in the STC Action A			
transportation to in-person events and meetings when needed. I understand this is a				
comm	nitment for the entire school year throu	gh May 2026.		
Parent	t Signature	Date		
Short	Answer:			
		nmental organizations? If yes, please share which		
organizations and what you do with the organizations.				
21	Are you involved in any other leaders	hip programs? If yes, please share which programs		
۷)	and what you do with the program.	inp programs: if yes, please share which programs		
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3)	what is your current career interest? help you achieve your goals?	How will participation in STC Action Ambassadors		

STCAA Essay: In one page or less please answer "Why do you want to join the Sea Turtle Conservancy Action Ambassadors?"