



# Documentary History Project for Youth 2017



## Scribe seeks Student-participants for 2017 Documentary History Project for Youth!

**DEADLINE: Friday, March 3, 2017 at 5PM**

The Documentary History Project for Youth is an after-school, weekend and summertime production workshop for middle and high school students. Up to 12 young people explore an aspect of the political, social or cultural history of Philadelphia by creating short video documentaries, audio works or websites. Students gain solid skills in media production - including planning, scripting, camera & sound recording, editing, and exposure to various types of media production software - FinalCutPro, AfterEffects, HTML and Audacity. The Documentary History Project for Youth program also helps young people learn about the process of studying and presenting history, teaching the skills of archive research, field interviews, data collection and analysis, constructing narratives and fact checking.

### **WHO IS ELIGIBLE:**

Young people, ages 13 to 18 (eighth to eleventh grade). No prior video making experience is necessary.

### **WHAT'S INVOLVED:**

Interested applicants must be willing to commit to 5 hours of work per week during the school year and up to 10 hours per week in the summer. Participants are paid an honorarium for their participation.

### **INFORMATION SESSIONS:**

Wed, February 1, 6:30 PM and  
Wed, February 15, 6:30 PM  
at 4035 Walnut Street, Philadelphia, PA 19104  
Please call (215) 222-4201 to reserve your place.

**For More Information:** (215) 222-4201 or [inquiry@scribe.org](mailto:inquiry@scribe.org) <http://www.scribe.org>

# ***Scribe Video Center's Documentary History Project for Youth - 2017***

## **Application Cover Sheet**

Thanks for your interest in being one of the students in the 2017 *Documentary History Project for Youth (DHPY)*. To make sure your application is complete, please fill out the top part of this cover sheet and use the bottom as a checklist to make sure you send us all the things we'll need to see.

### *Information We Need to Have*

Your Name \_\_\_\_\_

Your Home Address with Zip Code \_\_\_\_\_  
\_\_\_\_\_

Your Home Phone Number \_\_\_\_\_ Your Cell Number \_\_\_\_\_

An E-Mail Address Where We Can Reach You \_\_\_\_\_

Your Age \_\_\_\_\_ Your Current Grade in School \_\_\_\_\_

Name of Your School \_\_\_\_\_

The Address of Your School \_\_\_\_\_

A Phone Number for Your School \_\_\_\_\_

### *Checklist of Application Items You Must Submit:*

- A letter from your parent or guardian, saying that you have permission to be in the DHPY.  
This letter must include your parent or guardian's direct contact information.
- Copies of your 3 most recent report cards, even if 1 or 2 are from your previous school
- Two letters of support from recent or current teachers and/or your school counselor.
- On a separate piece of paper, attach your answers to these 3 questions:
  - 1) **Why are you interested in video making and what would you like to learn?**
  - 2) **Why is history important to you?**
  - 3) **Why would you make a good member of the 2017 Documentary History Project for Youth production team?**

When you've filled out the top and have gathered all the listed items, send this cover sheet and your packet to:

Documentary History Project for Youth  
Scribe Video Center  
4035 Walnut Street  
Philadelphia, PA 19104

**Application deadline: 5:00PM, Friday, March 3, 2017**

When all the applications are in, we will send you a letter about interviews and next steps. In the meantime, you, your parent or guardian or your school should feel free to call 215-222-4201, or email us at [inquiry@scribe.org](mailto:inquiry@scribe.org) with questions about Scribe Video Center or the Documentary History Project for Youth.

**We look forward to receiving your application!**

# Parental/Guardian Permission Form

Date: \_\_\_\_\_

Dear Scribe Video Center,

I, \_\_\_\_\_, give my child, \_\_\_\_\_, permission to participate in the Documentary History Project for Youth 2017, a program of Scribe Video Center.

Please feel free to contact me if you have any questions.

Sincerely,

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Name of Parent/Guardian: \_\_\_\_\_

Relationship to the applicant: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Email: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_