

Harvey Grade School Bands District 152
14741 Wallace St. Harvey IL. 60443
Phone: (708) 333-6390 #34

Greetings Dr. Adams, Board Members, and Mr. Kuzniewski,

It is with great alacrity and honor that I write to inform you of the Gwendolyn Brooks Jazz Band's invitation to perform at the Jazz Education Networks International convention this January. Throughout the years we have received many distinguished honors however this invitation is among the highest. District 152 has been identified as a trailblazer in music education. None of these achievements could have been possible without the support of our parents, administration, and school board.

In addition, it is my pleasure to share with you my recent acceptance to the Jazz Education Network's Education Committee. I have been asked to service on this committee as the international liaison for middle jazz education. This seat will allow me to share the wonderful practices of Harvey District 152 with music educators across the globe.

I would like the approval for the Gwendolyn Brooks Middle School Jazz Band to travel to Dallas, TX to perform at the 5th Annual JEN Conference held from Jan.8-11, 2014.

Additional information is enclosed.

I would also like to request the following 5 staff chaperones:

Nurse: Chaundra Williams

Community Ed.: Arletha Bolton

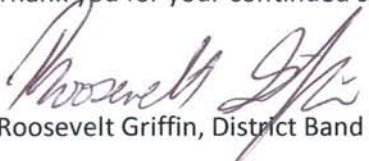
Parent Coordinator: Vanessa Young

Social Worker: Keesha Buchanan

Principal: Frank Kuzniewski

Enclosed: Conference Request, JEN Invitation, JEN Documents, Medical Release, Permission Slip, Hotel Info, Charter Bus Company.

Thank you for your continued support,


Roosevelt Griffin, District Band Director

HARVEY PUBLIC SCHOOLS DISTRICT 152
CONFERENCE/CONVENTION/WORKSHOP ATTENDANCE REQUEST

Please submit open copy of any information you may have concerning this request at least **TWO WEEKS BEFORE** requested C/C/W date(s).

Name of Person (please print): Roosevelt Griffin
 Grade/Subject/School: District Band
 Name/Date of C/C/W: Jazz Education Network Conference
 Location of C/C/W: Hyatt Dallas, TX

Give a tentative summary of expected expenses (s):

Registration:	\$	<u> </u>
Travel:	\$	<u>5,000.⁰⁰</u>
Food:	\$	<u>600.⁰⁰</u>
Lodging:	\$	<u>3,000.⁰⁰</u>
Other:	\$	<u> </u>
Estimated Total	\$	<u>8600.⁰⁰</u>

Will a substitute be required? Yes No All Day?

LONG RANGE PLANS _____ GOAL S _____ Explain what you desire to gain by attendance.

STUDENTS AND DIRECTOR APPLY THE CONCEPTS THAT HAS BEEN PREVIOUSLY BEEN PROVIDED BY DIST 152 AND GAIN NEW KNOWLEDGE OF BEST PRACTICES.

Roosevelt Griffin 8/20/13 Jane Knauer 8/20/13 [Signature] 9/11/13
 Applicant's Sig/Date Principal's Sig/Date Administrator's Sig/Date

NOTE: IF APPROVED, A WRITTEN REPORT MUST BE SUBMITTED TO THE PROGRAM ADMINISTRATOR WITHIN TWO WEEKS AFTER THE CONFERENCE/CONVENTION/WORKSHOP, ALONG WITH THE APPLICABLE EXPENSE REPORT. EXPENSES WITHOUT VALID RECEIPTS WILL NOT BE HONORED.

Approved Date: _____

Disapproved Date: _____

Account Name/Number _____ P.O. # _____

CHECK REQUEST: Accounts Payable Payroll Imprest

Substitute Account Name/Number: _____

Name of Substitute Called: _____

Business Manager Signature/Date _____

Superintendent's Signature/Date _____

COPIES TO: _____

JEN Conference 2014

Dallas, TX

Jan.8-12

Financial Plan

Estimated Total: \$8600.00

Fundraising and Parental Contribution= \$4300.00

Band Account # 10-1110-391-99-21= \$4300.00

No additional funds will be needed from Harvey District 152.

Folders

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Tue, 4:09 pm
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Subject: Invitation to Perform at the 2014 Jazz Education Network Conference
From: "Jazz Education Network" <jen@jazzednet.org>
Date: Wed, June 26, 2013 5:00 am
To: rgriffin@harvey152.org
Priority: Normal
Options: [View Full Header](#) | [View Printable Version](#) | [Download this as a file](#)

 Invitation to Perform at the
 Jazz Education Network
 5th Annual Conference
 January 8-11, 2014

Dear Roosevelt,

Congratulations! On behalf of the JEN Board of Directors and the Conference Selection Committee, we are delighted to inform you that your performance as indicated below has been selected for programming at the 5th Annual Jazz Education Network Conference, January 8-11, 2014 in Dallas!

NOTE: This email is SPECIFIC to only the Performance listed herein. In the event you submitted for multiple sessions, you will ultimately receive a separate email related to each event, with some notifications to follow at a later date. We appreciate your patience.



The **Jazz Education Network** is dedicated to building the jazz arts community by advancing education, promoting performance, and developing new audiences.

ABOUT

CONFERENCE CENTRAL

GENERAL STORE

SUPPORT US

ADVANCING EDUCATION

PROMOTING PERFORMANCE

DEVELOPING NEW AUDIENCES

History of JEN

The Jazz Education Network is an global non-profit 501(c)(3) organization based in the United States of America that seeks to advance jazz education, promote performance and develop new audiences. JEN was founded in 2008 in Chicago and now has over 1,500 members in 2 countries, every USA state and 7 Canadian provinces.

Our organization operates with a [volunteer working board](#) and three part time independent contractors. The [Founding Steering Committee](#), led by co-founders Dr. Lou Fischer and Mary Jo Papich, created the mission that JEN lives by today:

The Jazz Education Network is dedicated to building the jazz arts community by advancing education, promoting performance, and developing new audiences.

This is what we have accomplished in our first five years of operation:

1. Five years of operating in the black financially
2. Four standing committees and 13 special committees formed and in operation
3. Four successful, and profitable annual conference (reaching over 9,000 attendees)
4. Site locations booked and contracts favorably negotiated for JEN through 2017
5. The JENerations Jazz Festival launched in 2012 and expanded in 2013
6. The Mentor Program launched and seven students formally mentored
7. The Outreach Program launched in 2010 (with over 7,000 students served)
8. The JAZZ2U program launched in 2013 with the help of a generous donation from the Herb Alpert Foundation
9. A generous donation by Jamey Aebersold in 2013 will be used to help improve our membership and registration process.
10. More than \$28,000 in scholarship money awarded
11. Student composition showcase launched in 2011 with 16 student compositions featured
12. Thousands of dollars of instruments and print music donated to needy schools through the JENerosity Project
13. Advancement of scholarly research, audience development research and technology initiated at our annual conference
14. Strategic Plan developed and launched
15. Website launched, then redesigned, and then re-launched again with a major new upgrade coming up in September 2013
16. Strategic partnerships developed with Timeless Communications, NAFME, IASJ, MFA, PASIC, and MusicFest (Canada)
17. Hired three independent contractors to work for the organization

We are gearing up for our 5th Annual JEN Conference in Dallas, TX, USA at the Hyatt Regency Hotel at Reunion, January 8-11, 2014. Our annual conference serves teachers, students, artists, performing arts presenters, music industry partners, enthusiasts and more. We are expecting over 3,000 attendees at the conference and are working with local community arts leaders and jazz affiliates to make it a very successful event.

Past JEN conferences have included:

- [2013-Atlanta](#)
- [2012-Louisville](#)
- [2011-New Orleans](#)
- [2010-St.Louis](#)

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Education Committee

Education Committee: Sharon Burch, Chair

The charge of this committee is to develop resources or links to resources on the web for educators to help them teach jazz to students K-12. There is also the K-8 Subcommittee which focuses on the elementary and middle school grade levels.

Early Childhood: TBD

Elementary: TBD

Middle School: Roosevelt Griffin

HS Vocal Jazz: Mike Molloy

HS Instrumental Jazz: Nic Meyer

Strings & Global Jazz: Tino D'Agostino

Collegiate Vocal Jazz: Rosana Eckert

Collegiate Instrumental Jazz: Chris Madsen

Community Jazz Education Programs: Judy Shafer

Internet and Performance Jazz Education Programs: Jesse Nolan

Members At-Large: Mary Jo Papich, Darla Hanley

[Click here to see the K-8 Subcommittee](#)

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Official Conference Housing

We are proud to announce the **Hyatt Regency Dallas at Reunion, Dallas, TX, USA** as the Official Conference Hotel for the 5th Annual JEN Conference, January 8-11, 2014!

Click [HERE](#) to reserve your room at the Hyatt Regency.
DEADLINE: December 18th, 2013
to receive the JEN block rate of:
\$139
(single to quad occupancy)

Please note hotels have their own established policy regarding deposits, cancellation, incidentals, room refrigerators, extra bedding, group check-in, group baggage handling, number of people allowed per room, internet charges, and the like. JEN encourages you to discuss all policies specific to the hotel prior to your arrival. JEN cannot be held responsible for any charges related to your stay at a conference hotel during the conference.



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Performer/Presenter FAQ

ANNUAL CONFERENCE

PERFORMER/CLINICIAN APPLICATION FAQ

The Application Process is now CLOSED for 2014

Applicants will be notified in accordance with the TIMELINE below.

Important and useful Information follows below for Performers & Presenters scheduled to participate in the Annual Conference.

- The Application Submission Window to perform or present a clinic/research presentation or participate in the JENerations Jazz Festival at the 5th Annual JEN Conference, January 8-11, 2014 in Dallas, TX will be from February 1st - March 31st, 2013.
- A TIMELINE has been established to communicate directly with you as detailed below.
- In the event you do not receive a SID Number from JEN within two weeks of your initial application, please DO contact us in that regard.
- Applications that do not COMPLY with JEN requirements will be discarded.
- If you do not find an answer to your question, please do contact us by clicking the CONTACT JEN button located on the Home Page of the JEN website, being certain to select the 'Conference Clinician & Performer Information' category when submitting your request for information.
- **RESTRICTION:** A reminder that if you performed as a leader last year, you are not eligible to apply again this year. If you presented a clinic last year you are not eligible to present this year. There are no restrictions as to performing as a sideman or assisting another clinician.

In order to receive timely communications from the Jazz Education Network, you must:

- Teach your system to accept emails from JEN@JazzEdNet.org by inputting JEN as a contact in your system, otherwise information from JEN will wind up in your SPAM folder.
- Stay Informed! Check here often for updates!

COMMUNICATION TIMELINE

- **February 1st - March 31st (midnight EDT):** PHASE ONE & PHASE TWO Applications available online.
 - The PHASE ONE Application Form establishes your intent to apply.
 - The PHASE ONE Application Form assigns you a permanent JEN Submission Identification (SID) number.
 - The JEN Submission ID Number assigned to your PHASE ONE application form will be used throughout the application process to maintain accurate recording of your submission materials.
 - If you are an agent applying for various clinicians, be advised you will need to submit a separate PHASE ONE Application Form to secure a JEN SID number for EACH individual. As a sponsor of artists, you are limited to 4 applications maximum.
 - You will receive a follow-up email from The Jazz Education Network confirming receipt of your PHASE ONE Application Form.
- Complete the PHASE TWO Application Form:
 - Note the Initial Submission ID Number from the Phase One application confirmation email is REQUIRED to complete this form.
 - From the CONFERENCE CENTRAL Tab on the JEN Home Page, click on the Clinician/ Performer FAQ Page.
 - Then click on the PHASE TWO Application Form where you will be asked to upload specific support materials related to your particular application(s) in order to be reviewed by JEN.
 - NOTE: Your application is not complete until the PHASE TWO Application Form has been completed which REQUIRES the Initial JEN Submission ID Number mentioned above.

- Your Initial JEN SID Number from PHASE ONE Application Confirmation Email will be required to submit support materials related to your performance, clinic, or research presentation for publication and promotion. (NOTE: It will be included in your Invitation to Appear Letter)
 - A Final Title/Name of Ensemble is required at this time.
 - A 50 word description (maximum) related to your presentation, performance, and/or clinic.
 - Identify all individuals assisting on your presentation or performance and their sponsors (if applicable)
 - Individual or Ensemble Photo as appropriate to be uploaded online
 - If you are performing, a Stage Plot related to your ensemble's performance will be required. NOTE: Examples of how the rhythm section is configured on JEN stages are attached below for your reference. Be advised: The gear cannot be moved on our stages once set for the weekend.
- **September 1st:** JEN will send via email, a link to the JEN Conference Badge Portal directly to each participating Performer/Clinician/Leader in order for you to Register each of your participants online PRIOR to the conference.
 - **September 1st - October 31st:** All Ensemble Members (including Alloted Chaperones) or Clinic Panel **participants MUST be identified** at this time and REGISTERED through the JEN Badge Portal in order to receive complimentary badges on site:
 - Your Initial SID Number from the PHASE ONE Application Confirmation Email will be REQUIRED to complete the information in the Badge Portal.
 - Participants NOT entered into the Badge Portal will not receive complimentary badges at the conference registration counter until the leader or lead clinician provides a list of participants to the JEN Registrar on site.
 - BE ADVISED: This WILL no doubt cause long delays at Registration for you and others participating with you in the conference
 - **September 15th:** Request for video permissions to arrive via email to all performers/clinicians.
 - **September 15th - October 15th:** Submit any changes to your programming during this window.
 - **December 1st:** Information related to Conference check in, set-up scheduling and soundcheck (if applicable) will be sent to you and posted on the JEN website at the bottom of this page

Attachment	Size
JEN Big Band Stage Plot.pdf	117.25 KB
JEN Small Group Stage Plot.pdf	242.52 KB

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BROOKS MIDDLE SCHOOL
14741 WALLACE St.
HARVEY IL 60426
School Fax 708-333-3177

Band Room 708-333-6390 #34

School Office 708-333-6390

EMERGENCY MEDICAL RELEASE

In the event of an accident or serious illness, we will make every reasonable effort to contact you. However, if we are unable to do so, we will then transport your son/daughter to a medical facility. It is necessary to have prior permission to have your son/daughter treated at a hospital or medical facility so please sign the following statement allowing treatment for your child.

I authorize the Brooks Band Trip Chaperones to take such emergency action as deemed necessary, including the transportation of the student to a hospital or medical center. I do hereby authorize treatment, by a licensed medical doctor, of my child in the event of an medical emergency, which if in the opinion of the attending physician may endanger my son's/daughter's life, cause disfigurement, physical impairment, or undue discomfort if delayed. The authority is granted after a reasonable effort has been made to contact me.

STUDENT'S NAME (PRINT) _____

PARENT/LEGAL GUARDIAN SIGNATURE _____

DATE _____

FAMILY HEALTH INSURANCE COMPANY _____

INSURANCE CLAIM NUMBER _____

If, due to any religious faith, medical practices are not acceptable, please give detailed instructions to follow in case of accident or illness of your child below.

RETURN THIS FORM TO THE BAND DIRECTOR AT BROOKS MIDDLE SCHOOL. YOUR CHILD WILL NOT BE PERMITTED TO ATTEND BAND TRIPS UNLESS THIS FORM HAS BEEN RETURNED AND IS ON FILE.

PERMISSION AND WAIVER AGREEMENT

2014 Jazz Education Networks Conference Dallas, TX

I hereby grant permission that my child _____ may go on the Band Trip to Dallas, TX Jan. 8-12, 2014. I hereby direct that the Band Director, Harvey Grade School Band Parents Association, and chaperones of District 152 shall have complete authority for the well being, health, physical activity, and discipline of my child. In case of illness or any accident, I hereby authorize them to assume custody of my child and to do everything deemed necessary by them to properly care for my child. I also authorize the nearest hospital or doctor to give emergency medical treatment to my son/daughter while on tour. I further agree that in the event of disciplinary action requiring my child to be returned home, I will assume the full cost of this return by bus. I also realize that in the event that my child is caught doing something that is illegal that the local authorities will be contacted and I will have to pick up my child from those authorities.

I hereby release School District 152, Gwendolyn Brooks Middle School, the Band Directors, the Harvey Grade School Band Parents Association and the chaperones from any liability in connection with this tour.

_____ Date _____ Signature of Parent/Guardian

Home Telephone _____ Work Telephone _____

Emergency Contact _____

Emergency Telephone Number _____

THIS FORM MUST BE FILLED OUT IN INK.

BROOKS MIDDLE SCHOOL

14741 WALLACE St.

HARVEY IL 60426

School Fax 708-333-3177

Band Room 708-333-6390 #34

School Office 708-333-6390

BAND TOUR HEALTH INFORMATION

Student's Name _____ D.O.B. _____ Sex M F

Address _____ City _____

Parent's Name _____ Phone _____

Business Phone-Father _____ Mother _____

Emergency Phone (other than parent) _____

1. _____
Name Phone Number

2. _____
Name Phone Number

Family Physician _____

Address _____ Phone Number _____

HEALTH INFORMATION

1. Are there any medical conditions that the chaperones should know about your son/daughter? If so, be specific.

2. Can an emergency condition arise because of this condition? Please explain.

3. Has there been a recent illness, injury, hospitalization, or surgery?

4. Is there any limitation of physical activity? _____

5. List any known allergies. _____

6. List any medications he/she is allergic to _____

7. Is he/she currently taking:

A. Prescribed medication? _____ Name and dosage _____

For what condition? _____ Any side effects? _____

B. Over the counter medication? _____ Name and Dosage _____

For what condition? _____ Any side effects? _____

ALL MEDICATIONS MUST BE IN PROPERLY LABELED CONTAINERS WITH NAME OF STUDENT AND MEDICATION.

8. Are immunizations up to date? _____

9. Date of last Tetanus Booster _____

10. Does he/she wear contact lenses? _____