Genius Labs @ GMCC Digital Café

We believe every young person has the capacity for "genius."

Focused on the studio learning approach, Digital Café brings together technological access and youth-centered design to create opportunities that foster creativity, independence, critical thinking, and self-awareness. Digital Café is a laboratory learning experience designed for middle school youth and hosted on the top, newly renovated, floor of GMCC's Ewald Center.

About the 2021 Summer Session:

- Where: GMCC Ewald Center, 1100 E. Lake St., Minneapolis, MN 55407
- When: Tuesday Friday, July 20-30th, 10am -3pm
 - + an all family event on Saturday, July 31st
- Who: 16 middle school youth, ages 11-14 (1:8 Guide to Youth ratio)
- Digital equipment, lunch, and snacks provided

Deadline to apply for summer session: July 9th, 2021

Applicants will be notified of admittance no later than July 13th, 2021.

We are accepting applications for both the 2021 Summer and Fall sessions. Dates and times for the fall session have yet to be released.

Questions? Call Megan Young at 612-276-1548 or email myoung@gmcc.org. Learn more about GMCC at gmcc.org.



How to apply:

- Youth must apply using the provided application and submit either:
 - o electronically to Megan Young at myoung@gmcc.org;
 - by mail to Megan Young at 1100 E Lake St., Minneapolis, MN 55407;
 - or call 612-276-1548 to schedule time to come into our office.
- Acceptance will be determined on a case by case basis with a focus on equity and prioritizing students who are excited about learning and motivated to gain new skills.
- Upon acceptance families will be asked to complete a packet of onboarding materials including a media release, health/medical, and liability form.
- Families will also be required to sign a commitment form stating that youth will
 commit to attending all sessions or risk being dropped from enrollment (with the
 understanding that sickness and emergencies may occur).

Summer Session Schedule:

Tuesday - Friday, July 20-30th

Time	Activity
10:00 AM	Arrival and Morning Gathering
10:30 AM	Skill Session 1
11:45 AM	Lunch / Conversation
12:00 PM	Physical Activity
12:30 PM	Skill Session 2 and/or Wellbeing Experiences
1:30 AM	Personal Project / Studio Time
2:45 PM	Afternoon Gathering
3:00 PM	Departure

Commitment Form

Genius Labs @ GMCC Digital Café enrollment requires all guardians and youth to sign a commitment form. Your acceptance of enrollment into the Digital Café requires that youth attend all course sessions (unless dealing with an emergency). The Digital Café is not a casual drop-off child care arrangement.

This form must be completed upon acceptance into the Digital Café and prior to or on the first day of the enrolled session.

Ihere	by commit that will
Guardian's Name	Youth's Name
session. If my youth (due to mediunforeseen circumstances) canr Initiative Design and Implementa	igital Café each day of the applicable enrolled cal emergency, family emergency, bereavement, or not attend, I will contact Jerica Gomez (GMCC ation Lead) at jgomez@gmcc.org or call 612-276-
1558 as soon as I am able when a	ın unexpected absence may occur.
I understand that by not followin my youth in the Digital Café may	g the above outlined commitment, the enrollment of be revoked.
Print Guardian's Name	Sign Guardian's Name
Print Youth's Name	Date

Application

Participation information:

The following application is for the enrollment into Genius Labs @ GMCC Digital Café. I understand that should we be accepted, we will be required to sign a commitment and liability form, and provide medical and health information.

Please complete, in full, the information requested and questionnaire below. Completed applications should be summitted electronically to Megan Young at myoung@gmcc.org, by mail to Megan Young at 1100 E Lake St., Minneapolis, MN 55407, or call 612-276-1548 to schedule time to drop off at our office.

First Name	Last Name			Middle initial	
Street address	City	County	State	Zip	
Phone number	Email address	Date of Birth			
School Information:					
School name		Phone numbe	r		
Street address	City	County	State	Zip	
Parent/ Legal Guardian informa	tion:				
First Name	Last Name		 		
Street address (if different from participant)	City	County	State	Zip	
Phone number	Email address		 		



Application

Questionnaire (to be completed by the applying youth) Four words that describe you:					
r our words triat acsoribe god.					
Please make a list of things that you are interested in:					
What is your favorite movie/show/book/music?					
What is your favorite color?					

Tell us something else about yourself that you would like for us to know:

Application

ln t	In the box below, draw yourself:							
		L						

Other comments, information, or additional message?