



CONCERNED BLACK MEN
OF MASSACHUSETTS, INC.

Paul Robeson Institute
for
Positive Self-Development

Please visit our website for an overview of PRI: <http://cbmm.net/programs/pri-program/>

TO ALL PARENTS & GUARDIANS
New and returning families must submit:

1. Application for Admission: Fall 2018 – Spring 2019 Session
2. Medical Application for Admission: Fall 2018– Spring 2019 Session
3. Photo & Multimedia Release Form: Fall 2018 – Spring 2019 Session
4. Application for PRI Parent Volunteer Service: Fall 2018 – Spring 2019 Session
5. Pre-Orientation and Registration PRI Parent Check List
6. A copy of your child's last report card

**IN ADDITION, YOU ARE REQUIRED TO SUBMIT A COPY OF YOUR CHILD'S REPORT CARD
FOR EVERY REPORTING PERIOD OF THE 2018-2019 SCHOOL YEAR**

This PRI registration packet consists of the following:

1. CBMM Fact Sheet
2. General Rules for the Paul Robeson Institute for Positive Self-Development
3. Application for Admission: Fall 2018 – Spring 2019 Session
4. Medical Application for Admission: Fall 2018 – Spring 2019 Session
5. Photo & Multimedia Release Form: Fall 2018– Spring 2019 Session
6. Application for PRI Parent Volunteer Service: Fall 2018 – Spring 2019 Session
7. Pre-Orientation and Registration PRI Parent Check List
8. 2017-2018 TENTATIVE Days of Operation Calendar
9. Northeastern University Directions & Parking

Please submit your completed original application packet to Bros. Luke or Caleb

Stay up to date: Should your Parent/Guardian contact information change during the 2018-2019 PRI calendar year, please keep CBMM updated on such changes. *~Thank you*

We look forward to an exciting and productive 2018-2019 PRI session.

Sincerely,

The Concerned Black Men of Massachusetts, Inc.



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CBMM FACT SHEET

Concerned Black Men of Massachusetts, Inc. (CBMM) believes young people are capable of making positive choices when provided with viable, constructive alternatives. CBMM helps at-risk inner-city black male youth recognize those alternatives to drugs, gangs and violence, thereby making positive contributions to our society.

Mission Statement

“To Improve the Quality of Life in the Black Community by Reaffirming the Viability of the Black Male.”

History

In April 1989, a group of 9 black men from different backgrounds and professional disciplines met to discuss quality of life issues for African Americans. From this evolved the Concerned Black Men of Massachusetts (CBMM), with the mission to work with the community to improve the quality of life for African Americans by reaffirming the role of black men. A non-profit organization incorporated June 21, 1989.

Location for the Paul Robeson Institute for Positive Self-Development (PRI)

John D. O’Bryant African American Institute
Northeastern University,
40 Leon Street, Boston, MA 02115

Membership

Open to all men 18 years or older, candidates must be sponsored by a member in good standing or the membership committee.

Paul Robeson Academy: Ages 7-13, 3rd through 6th grade. Saturday program focusing on presentation/oratory skills academics, recreation and personal development.

Boys to Men Program: Ages 13-14, 7th through 8th grade. An extension program for graduates of Paul Robeson Academy designed to build on the foundations established in PRI, focused on physical fitness and basic academic skills.

D-Two Program: Ages 14-18, grades 9th through 12th. A program designed to promote responsibility in our youth via mentoring the young men enrolled in the Paul Robeson Academy. Students are also prepared to move on to some form of higher education.



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Dear PRI Parent/Guardian,

Please review the following rules. We ask that you make certain your student has also read them. ~Thank you

General Rules for the Paul Robeson Institute for Positive Self-Development:

1. All students in the Paul Robeson Institute for Positive Self-Development must sign-in before Harambee in the morning and sign-out before leaving to go home. This will help us keep track of who is here, how many days you participated, and account for where you were on Saturday.
2. All Paul Robeson Institute for Positive Self-Development students must wear their “red PRI T-shirt” given to him at the annual “Rites of Passage Ceremony”. If another T-shirt is worn, it must display a positive message.
3. All Paul Robeson Institute for Positive Self-Development Brothers must ask permission from a CBMM Brother to go to the bathroom or to leave the classroom.
4. All Paul Robeson Institute for Positive Self-Development Brothers must greet each other as they arrive. You must look your brother in the eyes and say, "Good Morning."
5. All Paul Robeson Institute for Positive Self-Development Brothers must help in setting up and taking down furniture, equipment, room clean up and any other projects when instructed by a CBMM Brother.
6. The vending machines or soda machines are not to be used at any time on Saturday. If you are hungry or thirsty ask one of the older brothers for food or drink. We will have nutritious food for you.
7. All eating will be done during the times we have scheduled. All eating shall be restricted to the Cabral Center and nowhere else in the Institute unless instructed by a CBMM Brother.
8. No profanity, bad language, at any time.
9. All Paul Robeson Institute for Positive Self-Development. Little brothers must tell their parents or guardians what they did during their Saturday sessions.
10. No hats, do-rags, toys, candy, chewing gum, money, video games or electronic devices are allowed at any time. No wearing of pants hanging off your posterior.
11. Disruptive behavior will not be tolerated. You must be respectful at all time.

**Remember your word is your bond.
A man is measured by his actions.**



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If possible, please
staple a photo of
your child in this
space so as to assist
his CBMM mentors
in getting to know
our PRI young man
Thank you

APPLICATION FOR ADMISSION: FALL 2018 – SPRING 2019 SESSION
PRINT ALL INFORMATION CLEARLY

IMPORTANT: PLEASE ATTACH A COPY OF THIS APPLICANT'S LAST SCHOOL REPORT CARD

STUDENT'S NAME: _____ AGE: _____ D.O.B. : _____
_ NEW STUDENT (circle one): Yes No **If you answered "No", indicate the number of years at PRI _____**
SCHOOL: _____ GRADE: _____
PARENT/GUARDIAN'S NAME: _____
PERMANENT ADDRESS: _____
CITY: _____ STATE: _____ ZIP: _____
HOME PHONE: _____ CELL #: _____ WORK #: _____
E-MAIL ADDRESS: _____
PHYSICAL LIMITATIONS OR CONSIDERATIONS: _____

Why do you want your son to be enrolled at the Paul Robeson Institute for Positive Self-Development?

CONTACT INFORMATION IN CASE OF EMERGENCY

NAME: _____ PHONE #: _____
ADDRESS: _____
RELATIONSHIP: _____

KHAN ACADEMY REQUIREMENT

Your child is required to have a Khan Academy account

If your child does not have a Khan Academy account:

1. Access Khan Academy on a home computer or at the library at <http://www.khanacademy.org/>
2. Have your child create his personal Khan Academy account

My child has a Khan Academy account: Yes No

Under the professional direction of the Paul Robeson Institute (PRI), I give my permission for my son/ward, _____, to participate in all scheduled supervised activities (including field trips) of the PRI as indicated in the 2018-2019 PRI calendar year, (which is subject to change due to available resources) with the understanding that he can and will participate. I also give permission to my son's/ward's teacher and principal to collaborate on my behalf with the PRI liaison in order to ensure my son's positive growth and development in this program.

Signature of Parent/Guardian _____ Date _____



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MEDICAL APPLICATION FOR ADMISSION: FALL 2018 – SPRING 2019 SESSION

PLEASE PRINT ALL INFORMATION CLEARLY

STUDENT'S NAME: _____ AGE: _____ D.O.B: _____

Health Insurance Provider: _____ Policy #: _____

Physician Name: _____ Phone: () _____ - _____

Does your child have allergies? Yes No

If Yes, please explain: _____

Does your child wear glasses or contact lens? Yes No

Please indicate if student experiences or has experienced any of the following - *Please attach an additional sheet if needed:*

	Yes	No	Not Known	Details (i.e. how often, usual treatment, warning signs)
Headaches				
Convulsions/Seizures				
Fainting Spells				
Vision Problems				
Hearing Problems				
Breathing Problems				
Heart Problems				
Blood Clotting				
Stomach/Bowel				
Skin Problems				
Frequent Infections				
Diabetes				
Other (Please Explain)				

Will your child be taking non-prescription medicines during the PRI program? Yes No

Medication(s): _____

For: _____

Doctor's Approval is needed for over-the-counter drugs (aspirin, cold capsules, etc.)

Physician's Signature: _____

Initial if signed by Nurse or Physician's Assistant

Will your child be taking prescription drugs during the PRI program? Yes No

Medication(s): _____

For: _____

EMERGENCY MEDICAL/DENTAL TREATMENT RELEASE

All medications must be in the original container & the pharmacy label must be attached and clearly legible for prescription drugs

Although every effort is made to provide a safe environment, I recognize that there is always a risk of accident. I, as parent or legal guardian, authorize CBMM/PRI to obtain any necessary emergency medical treatment for my child in the event that I or my designated representative cannot be reached. I agree to pay all reasonable costs for such medical care, attention and treatment, and hereby release, discharge, indemnify and agree to hold harmless Concerned Black Men of Massachusetts/Paul Robeson Institute, Northeastern University, The University of Massachusetts Boston, its trustees, employees, agents and representatives in the exercise of such authority.

SIGNATURE OF PARENT/GUARDIAN

DATE



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PHOTO AND MULTIMEDIA RELEASE FORM: FALL 2018 – SPRING 2019 SESSION

I hereby authorize CBMM and those acting on its behalf to:

I. Record my image, likeness, and/or voice on a photographic, video, audio, digital, electronic, or any other medium;

II. Use, reproduce, modify, exhibit, and/or distribute any such recording in any medium for any purpose that the CBMM may deem appropriate, including promotional or advertising efforts with not compensation to me; and

III. Use my name in connection with any such recordings or uses.

I understand that I shall have no right to inspect or approve any such recordings and uses and those they shall remain the property of the CBMM. I release the CBMM and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I may have in connection with all such recordings and uses. I have read and fully understand the terms of this release.

Child's name (print): _____

Child's name (sign): _____

Parent/Guardian (print): _____

Parent/Guardian (sign): _____

Address: _____

Telephone number(s): _____

E-mail address: _____

Date: _____



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APPLICATION FOR PRI PARENT VOLUNTEER SERVICE: FALL 2018 – SPRING 2019 SESSION

PLEASE PRINT ALL INFORMATION CLEARLY

NAME: _____

PERMANENT ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME TELEPHONE: () _____ CELL: () _____ WORK: () _____

Leave blank if you do not wish to be contacted at work

What time of day may a PRI representative contact you at the phone number(s) you provided: _____

E-MAIL ADDRESS: _____

The **Concerned Black Men of Massachusetts** seeks partnerships with the parents and guardians of our young men on their journey to becoming a proud back man. We encourage you to be an active participant in your child's experience here at the **Paul Robeson Institute for Positive Self-Development**.

Please take a look at the list of the volunteer opportunities below and **check off the items you are interested in**.

- I would like to participate in the PRI Parents Committee
- I would like to participate in the Fund Raising Committee
- I would like to participate in the Newsletter Committee
- I would like to write/contribute articles for the newsletter
- I would like to help with program day breakfast food preparation

- I would like to help with program day lunch preparation
- I would like to help with end of day kitchen close out

- I would like to assist with food shopping
- I would like to help organize donations for special events/projects

I would like to assist in creating and organizing a parent phone tree

I would like to assist with food prep. For the "Rites of Passage" Celebration

I would like to support the program by _____

↑
Suggestions or specific activity in which you would like to play a leadership role:



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Pre-Orientation and Registration PRI Parent Check List

TO ALL PRI
PARENTS:

All participants, including returning families, must complete ALL registration forms for each child.

Please submit a copy of your child's most recent report card with his application. This piece of information is vital in assisting CBMM mentors to identify areas of concern as we plot our path to best address the needs of our young men.

Stay up to date: Should your PRI Parent contact information change during the 2018-2019 PRI calendar year, please provide CBMM with your updated information. ~*Thank you*

1. Plan to arrive at 40 Leon St. at 9:00 am on Saturday, September 22, 2018

See the Northeastern University Campus

Map-also on last page of application packet:

<http://www.northeastern.edu/campusmap/printable/campusmap.pdf>

2. Have you read the PRI General Rules? YES NO

3. Have your son wear his "RED PRI T-shirt". YES NO

4. Have you made certain that your child has read the PRI General Rules? YES NO

5. Optional: Have you attached on photo of your child to his application? YES NO

6. Have you attached a copy of your child's most recent report card to his application? YES NO

7. A copy of the tentative PRI Saturday Days of Operation is included in this application packet.

8. Please ensure that you have completed the following:

PRI Application for Admission – COMPLETED: YES NO

PRI Medical Application for Admission – COMPLETED: YES NO

PRI Photo & Multimedia Release Form – COMPLETED: YES NO

Application for PRI Parent Volunteer Service – COMPLETED:
YES NO

Thank you for your cooperation!



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2018-2019 TENTATIVE Days of Operation Calendar

For each individual learning session, the entire PRI group will **begin** in the following fashion;

- Breakfast & sign-in
- Call-to-order and welcome from PRI Program Co-Directors and/or Program Coordinator
- Harambee: Nguzo Saba (Seven Principles) and “Proud Young Black Man” call and response
- Recap previous week and outline the day’s learning activities

Similarly, for each individual learning session, the entire PRI group will **end** in the following fashion;

- Call-to-order and recap of day from PRI Program Co-Directors
- Announcements (if any) and preview of next week’s learning session
- Harambee: Nguzo Saba (Seven Principles) and “Proud Young Black Man” call and response
- Prayer of Thanks, lunch & dismissal (sign-out)

Session	Date	
1	Sep 22	Program Orientation
2	Sep 29	Who is Paul Robeson?
3	Oct 13	Brotherhood
4	Oct 27	
5	Nov 17	STEM Presentation
-		No PRI – Thanksgiving weekend
6	Dec 1	Dress for Success
7	Dec 15	Kwanzaa Celebration
-		No PRI – Christmas-Kwanzaa Break
8	Jan 5	Game Day
9	Jan 19	
10	Feb 2	Black History
11	Feb 16	
12	Mar 2	
13	Mar 16	
14	Apr 6	
15	Apr 27	
16	May 4	Mother’s Day at PRI
17	May 18	CAREER DAY
-		No PRI – Memorial Day weekend
18	Jun 1	Rites of Passage Preparation
19	Jun 8	Rites of Passage Preparation
20	Jun 15	Rites of Passage (final session)



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NORTHEASTERN UNIVERSITY DIRECTIONS & PARKING

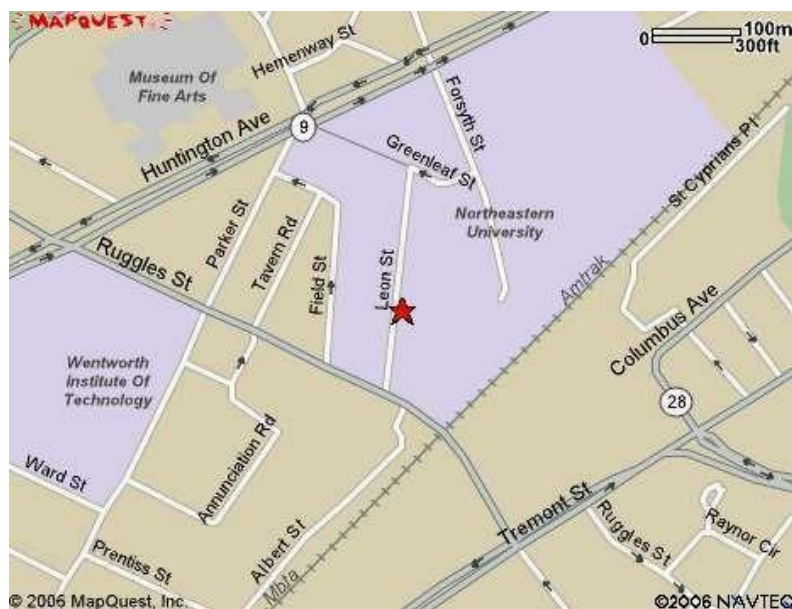
JOHN D. O'BRYANT AFRICAN-AMERICAN INSTITUTE
Northeastern University
40 Leon Street
Boston, MA 02115

MBTA Orange Line: Go to the Ruggles Street station. Use the exit door marked **NORTHEASTERN**. Walk across the lawn directly behind Ruggles Station. You will see Ryder Hall on your left and Shillman Hall on your right. Leon St. will be directly in front of you. Look for the sign, which says **JOHN D. O'BRYANT AFRICAN-AMERICAN INSTITUTE** diagonally to your right.

MBTA Green Line: Take the "E" or "Arborway" trolley to the Northeastern University stop. Cross to the south side of Huntington Avenue (the same side as the YMCA), walk down Forsyth St. Take your first right onto Leon St. and Look for the sign which says **JOHN D. O'BRYANT AFRICAN-AMERICAN INSTITUTE**.

Parking when arriving by automobile:

Free parking is available in the Northeastern University Columbus Avenue Parking Lot. Parking is available for a fee (\$6.00) at the **Renaissance Park Garage, 835 Columbus Avenue**, located on the corner of Columbus Avenue and Melnea Cass Boulevard. Allow yourself about 10 minutes to walk from the Renaissance Park Garage or the Columbus Ave. Parking Lot to the John D. O'Bryant African-American Institute. **Please be aware, the Northeastern University Police will ticket and tow your vehicle if you park on Leon St.**



For a more detailed Northeastern University campus map, please visit:
<http://www.northeastern.edu/campusmap/printable/campusmap.pdf>