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| C:\Documents and Settings\HRPS09083\Desktop\HRPS Flash 40kb.jpg | **Halton Regional Police Service**  **MY CAMP Application** |

**MY CAMP (Mentoring Youth Camp) is being offered to current grade 7 and 8 Halton Region Students. School Officers recognize the importance of youth engagement and education over the summer months and are looking for students who are interested in community safety and wellbeing to develop their leadership potential. The program is FREE but space is limited!**

**Instructions**

1. Application Packages can be printed and filled in by hand, or filled in electronically. If the Application Package is handwritten, please print in a neat and clear manner.
2. All sections within the Application Package must be filled in. Application Packages with incomplete sections will not be considered.

Please note there are two (2) Parts, A&B, to be completed and submitted.

1. Information provided in the Application Package will be used to assess the applicant’s suitability for the M.Y. CAMP program. Please have the applicant complete the form in their words with as much detail as possible.
2. The completed Application Package can be submitted to the attention of Constable Stephanie Spencer #9648 via email at [stephanie.spencer@haltonpolice.ca](mailto:stephanie.spencer@haltonpolice.ca)
3. All Application Packages must be received no later than **Monday, June 16, 2025 at 4:00 p.m.**
4. Please note there is NO COST for this opportunity thanks to the generosity of ProAction Cops & Kids (https://www.copsandkids.ca/)
5. Only successful applicants will be contacted.

**Questions?**

Email Constable Stephanie Spencer: stephanie.spencer@[haltonpolice.ca](mailto:dawn.freeland@haltonpolice.ca%20)

**Part A - Application:**

Applicant’s Personal Information

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| **Last name:** | |  | | | | | **First name:** |  | |
| **Date of Birth:** (day/month/year) | | | |  | | | | | |
| **Address:** | |  | | | | | | | |
| **City:** |  | | | **Province:** |  | | | **Postal code:** |  |
| **Personal Email:** | |  | | | | | | | |
| **Home phone #:** | | |  | | | **Cell phone #:** | |  | |
| **Emergency Contact Information:** | | | | |  | | | | |
| **Parent(s)/Caregiver Name(s):** | | | | |  | | | | |
| **Parent(s)/Caregiver Phone:** | | | | |  | | | | |
| **Parent(s)/Caregiver email:** | | | | |  | | | | |

Education

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| **Name of Elementary school currently attending:** | |
| **What grade are you currently in (2024/2025 school year):** | |
| **Will you be returning to a school in September 2025 within Halton Region?** | Yes  No |

Other Skills, Interests, and Hobbies

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| Please describe any skills, interests, or hobbies you may have. Please provide as much detail as possible. |

Why You? | Tell us about you! (Please provide as much detail as possible)

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| **Describe yourself as a person. What makes you unique?** |
| **Have you participated in any leadership roles or activities? Please explain:** |
| **Why do you feel that you would be the best person for this opportunity?** |
| **How do you feel about the community in which you live and the school you go to?** |
| **Why are you interested in the M.Y. CAMP program?** |
| **What do you expect to gain from this experience?** |
| **Please indicate your MY CAMP preference:**  **July 21-25, 2025**    **August 11-15, 2025**  **Available for either week.**  **Do you have any prior commitments or vacation plans during the week of July 21-25 or August 11-15, 2025 that may interfere with this opportunity?**  Yes  No  **If ‘yes’ to the above question, please explain (i.e. prior commitment):** |
| **Would you require transportation to and/or from Halton Police Headquarters,** 2485 North Service Road West, Oakville Yes  No  **If ‘yes’ to the above question, please explain (to, from, both, some of the days or all):** |

I hereby declare that the foregoing information is true and complete to my knowledge. I agree to participate in the M.Y. CAMP program which is intended to support youth to gain a valuable mentorship relationship with local police staff and community partners, exposure to general life skills and enrich leadership potential in their community.

Applicant’s Signature:

Date:

**Parent or Legal Guardian has reviewed and endorses Section A of the Application Package that is being submitted by their youth.**

Parent / Legal Guardian Name:

Parent / Legal Guardian Signature:

Date:

**SECTION B: Endorsement / Recommendation**

This section is to be completed by a school representative (for example: teacher, principal, vice-principal, guidance counselor or child and youth worker CYC).

I hereby recommend this youth for the **M.Y. CAMP** Mentoring Youth program with the Halton Regional Police Service. This youth displays qualities that make them an excellent candidate for this opportunity. I do not have any concerns about the ability of this youth to conduct themselves in an appropriate manner in a cooperative educational and learning placement with the Halton Regional Police Service.

Questions and Completed forms can be emailed directly to [stephanie.spencer@haltonpolice.ca](mailto:stephanie.spencer@haltonpolice.ca) (or returned to the requesting student for submission).

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| **Student Name:** | **School and Current Grade:** |
| **Person completing this form:** | **Email address:** |
| **Relationship to student:** | |
| **How long have you known this student?** | |
| **Describe this student’s strengths:** | |
| **Describe this student’s areas for improvement/development:** | |
| **Describe any barriers to success that this student may have encountered:** | |

Signature:

Date: