

YOUTH IN POLICING INITIATIVE Woodstock Police Service

Personal information on this form is collected under the authority of the Police Service Act and the Municipal Freedom of Information and Protection of Privacy Act and will be used to assess your suitability for participation in the YIPI Program.

Personal Informa	tion				-
Last Name:	First Name:	Gender: Man Other preferred pronouns):		oman Dur	
Address:		Date of Birth:			
City:	Province:	Postal Code:			
E-mail:					
Home Telephone I	Number:	Cell Telephone	Number	:	
Do you have a Driv If yes, please prov	ver's License? ide your Driver's License r	Yes number.		No	
Do you understand assigned worksite?	d that you are responsible ?	for your own transporta Yes	ation to/fro	om your No	
Identify the method Woodstock)?	d of transportation to/from	the Headquarters (615	Dundas	Street,	
Have you participa	ted and completed a Yout	th in Policing Initiative in	n the past	:?	
		Yes		No	
If yes, where did ye	ou complete the Youth in I	Policing Initiative?			

Have you previously applied for a YIPI student position?	Yes		No	
Have you ever had any contact with the police?	Yes		No	
If so, please describe this interaction, positive or negative. If space to address the above question, please attach an addit application form.				
Have you ever been investigated or interviewed by a Police a matter?	Service	regarding	j any	
	Yes		No	
If yes, to the above question, please explain in the below spare require additional space to address the above question, pleasheet(s) to this application form.	•		•	
Have you ever been convicted of any criminal offence for wh granted? (This means any fine, period of imprisonment or period the court).				by
	Yes		No	
If yes, to the above question, please explain in the below spa require additional space to address the above question, plea sheet(s) to this application form.				

Education

Name and Address of Secondary School:			
Highest level/grade completed:			
Will you be returning to a Woodstock high school in Septemb	er?		
	Yes	No	

Other Courses (e.g. First Aid/CPR), Workshops & Seminars

Name of course, workshop & seminar attended	Organization	Year Completed

Employment History (include Paid & Volunteer)

# 1 Name and Address of Employer:	Telephone Number:
Date of Employment: From:	То:
Duties:	
Reason For Leaving:	
Name of Supervisor:	

# 2 Name and Address of Employer:	Telephone Number:
Date of Employment: From: T	
Duties:	
Reason For Leaving:	
Name of Supervisor:	
# 3 Name and Address of Employer:	Telephone Number:
Date of Employment: From:	То:
Duties:	
Dulles.	
Reason For Leaving:	
Name of Supervisor:	
Have you ever been discharged or asked to re	esign from a job? If yes, please explain:
	Yes 🗌 No 🗌
May we contact your past and present employ	ver(s)? Yes D No D

Other Skills, Interests, & Hobbies

References

Name & Relationship: (include at least 1 school reference)	Organization Address & Telephone Number:

Security Check

Please provide full information of parents or legal guardians plus siblings, including step and half blood relatives.

First & Last Name	Relationship	Current Address & Telephone Number

Declaration of all individuals residing at your current address (please include all roommates, tenants and anyone else who lives in your home.)

First & Last Name	Relationship

Why You?

If you require additional space to address any of the following questions, please attach an additional sheet(s) to this application form.

How did you hear about the Youth in Policing Initiative?
In your own words, describe how you fit the definition requirements for a youth at risk of future victimization or offending based on your background, environment, and/or personal experiences within your community?
What does the Youth in Policing Initiative mean to you?
Why are you interested in the Youth in Policing Initiative?
What do you expect to gain from this experience?
Do you have any prior commitments that may interfere with this opportunity?