

RCMP National Youth Advisory Committee Application Form

Please complete all sections of the form below.

Once you have it filled out, send it by email to: CYCP_CPCJ@rcmp-grc.gc.ca, by fax to 613-825-8582 or by mail to: National Youth Advisory Committee - NCPS
73 Leikin Drive, Mailstop # 8
Ottawa, ON, K1A 0R2

Section A - Commitment to the National Youth Advisory Committee (NYAC)

The goal of the committee is to ensure that the youth voice is represented within the RCMP and to assist with the development of effective youth strategies and initiatives. Members of the National Youth Advisory Committee interact through an online forum to discuss issues that matter to them. They are expected to respond to all weekly or bi-weekly discussion questions.

I, _____ (name of young person), understand the goal of the National Youth Advisory Committee and commit to devoting between 2 and 4 hours of my time a month responding to all discussion topics.

Signature: _____ Date: _____

I, _____ (name of parent/legal guardian) support the commitment that my young person is making towards the RCMP National Youth Advisory Committee.

Signature: _____ Date: _____

Section B - Personal Information:

Name (first and last name): _____

Full mailing address: _____

Phone number: (_____) _____

Email address: _____

Birthday: (YYYY-MM-DD) _____

Section C - School Information:

Name of school: _____

School's mailing address: _____

School's phone number: (_____) _____

Section D - Tell us more about you:

1) Why do you want to be a member of the National Youth Advisory Committee?

2) How do you plan to balance your commitment to the National Youth Advisory Committee (2 to 4 hours a month) with your school and extracurricular responsibilities?

3) In which of Canada's official languages do you feel most comfortable communicating?
Please circle one:

English / French

4) For the official language that you **DID NOT** circle in the previous question, how would you rate your ability? Please circle the level that best corresponds to how you would describe your ability in each area:

Writing: Beginner / Intermediate / Advanced

Reading: Beginner / Intermediate / Advanced

Speaking: Beginner / Intermediate / Advanced

Section E: Reference

Please ask a teacher, principal or guidance counsellor to act as a reference by asking them to complete this form. Make sure to return it with your application.

Name of Applicant: _____

Name of Reference: _____

Function:

Teacher

Police officer

Principal

Youth worker

Guidance counselor

Other (please specify): _____

How do you know the applicant? _____

How long have you known the applicant? _____

Phone number (work): _____

Email address: _____

Please sign and date the section below:

I, _____, certify that I know the applicant _____ and that he or she is **between the ages of 13 and 17 as of September 1, 2013**. I fully commit to supporting him or her, throughout their commitment on the National Youth Advisory Committee.

Signature: _____ Date: _____