

**STEP UP Leadership Program
Leaders in Training
APPLICATION FORM**

To be eligible for the STEP UP Leadership Program, you must be new to the program and between the ages of 15-18, living in housing directly managed by BC Housing.*

Deadline: Wednesday JUNE 12th, 2019 4PM		TO BE COMPLETED BY APPLICANT AND RETURNED TO Tricia Irish, Community Developer 201-3440 Douglas Street, Victoria, BC V8Z 3L5 Email: tirish@bchousing.org or Fax: 250-475-7551			
First Name:		Last Name:			
What grade will you complete in June 2019?		Birthdate: (mm/dd/yyyy):			
Please provide the name of the housing development in which you live:					
Home Phone:				Cell Phone:	
Email Address:					
The program runs July 2th to August 23rd. Will you be able to commit to the first 2 weeks of training, plus at least 4 out of 6 weeks of work experience?				<input type="checkbox"/> YES	<input type="checkbox"/> NO
How did you hear about the STEP UP Leadership Program?					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Family	Friends	Flyer	Mail-out letter	BC Housing website	From past participant
<input type="checkbox"/> Other, please specify:					

*Directly managed housing complexes in Greater Victoria include Bay View, Cedar Townhouses, Corners Place, Edge Place, Evergreen Terrace, Juniper Gardens, McKenzie Terrace, Scotia Green and Union

Please answer the following questions:

1. Why have you applied to the STEP UP Leadership Program?

2. Do you have any previous work or volunteer experience? If so, please list below or send us your resume if you have one.

3. What hobbies or activities do you do in your spare time?

4. The work experience with STEP UP Leadership takes place in a kids camp. Do you have any experience working with younger kids? For example, babysitting, coaching, activities with younger siblings, etc. (Note: this is not required for a fun summer.)

5. Do you have any other training that might be helpful over the summer? For example, Home Alone, Red Cross, babysitting, etc. (Also not required but we'd love to know.)

I hereby certify that the information provided in this application is true and factual.

Print Name: _____

Signature: _____ Date: _____

APPLICATION PERMISSION

I, _____ (Print Name) the parent / guardian of the above-named applicant hereby give my approval for the release of the above information and for my child to apply to the STEP Up Leadership Program.

Signature: _____ Date: _____

Email inquiries to: tirish@bchousing.org or call 250-978-2918.

Personal information is collected on this form in accordance with section 26(c) of the *Freedom of Information and Protection of Privacy Act* for the purpose of determining your eligibility for the STEP UP Leadership Program. If you have any questions about the collection of your information, please contact BC Housing's Privacy Officer by phone at 604-433-1711 or by writing to 4555 Kingsway, Burnaby, BC V5H 4V