

Vancouver Foundation's LEVEL youth initiative aims to engage and provide training and leadership opportunities to young Indigenous, racialized immigrant and refugee youth to advance racial equity in B.C. Participants of the LEVEL Youth Policy Program (YPP) will gain the necessary skills to enable them to help shape and advocate for public policy that addresses relevant issues in their own communities.

Please submit your completed application to [info@levelvf.ca](mailto:info@levelvf.ca) with "YPP Application: YOUR NAME" as the subject line.

**FOR MORE INFORMATION VISIT:** <https://www.levelvf.ca>

A. PARTICIPANT INFORMATION			
FIRST NAME	LAST NAME	PREFERRED PRONOUN	DATE OF BIRTH (DD/MM/YY)
MAILING ADDRESS			
EMAIL ADDRESS		PHONE NUMBER	
<p><i>Vancouver Foundation is actively committed to ensuring that we include youth from communities that face systemic barriers. Please answer the following questions to help us determine if we are adequately reaching our target communities. Your response is voluntary and you're welcome to identify with more than one designated group. Tracking this information ensures that we remain accessible to diverse youth communities. This information will remain confidential and will not be shared.</i></p>			
DO YOU IDENTIFY AS INDIGENOUS? (STATUS, NON-STATUS, TREATY, NON-TREATY, INUIT OR MÉTIS)		YES NO	IF YES, PLEASE SPECIFY YOUR NATION, COMMUNITY OR BAND:
DO YOU IDENTIFY AS A REFUGEE, NEWCOMER OR IMMIGRANT?	YES NO	IF YES, IN WHAT YEAR DID YOU COME TO CANADA?	IF YES, PLEASE SPECIFY YOUR COUNTRY OF ORIGIN OR CULTURAL GROUP:
PLEASE SPECIFY YOUR CURRENT SCHOOL AND/OR EMPLOYMENT STATUS?		WHAT IS THE HIGHEST LEVEL OF FORMAL EDUCATION YOU'VE COMPLETED?	
FULL-TIME STUDENT	WORKING FULL-TIME	SOME HIGH SCHOOL	POST-SECONDARY GRADUATE
PART-TIME STUDENT	OTHER (PLEASE SPECIFY BELOW)	HIGH SCHOOL GRADUATE	OTHER (PLEASE SPECIFY BELOW)
		SOME POST-SECONDARY	
<p>The LEVEL YPP involves 12 to 14 full training days over the course of 6 to 7 months. Training sessions will be approximately two full-days every month (excluding travel time). Please visit the website for details about the specific dates and times for classes in 2019. Young parents who require childcare expenses can request assistance with covering those costs. <b>IF YOU WOULD LIKE TO REQUEST ASSISTANCE, PLEASE INDICATE HOW MANY CHILDREN YOU HAVE THAT WOULD NEED CHILDCARE IN ORDER FOR YOU TO ATTEND THIS PROGRAM.</b></p>			
YES, I REQUIRE ASSISTANCE WITH CHILD CARE FEES		I HAVE CHILDREN THAT WOULD REQUIRE CHILD CARE SUPPORT	
<p>WHAT LANGUAGES CAN YOU COMMUNICATE IN MOST CONFIDENTLY?</p> <p>The language of instruction for the program will be English and there will be some assigned readings in English. Participants should have a good understanding of spoken English and at least some basic ability to speak and read English. To help plan for the program and language support, please indicate your ability to speak, read, and write in English by selecting the appropriate levels below(1 is basic, 2 intermediate, 3 advanced).</p>			
BASIC		INTERMEDIATE	ADVANCED
ENGLISH – SPOKEN			
ENGLISH – WRITTEN			

**B. APPLICANT EXPERIENCE (OR OPTIONAL VIDEO - SEE BELOW)**

PLEASE DESCRIBE ANY RECENT WORK AND/OR VOLUNTEER EXPERIENCE:

PLEASE INDICATE YOUR FAMILIARITY WITH PUBLIC POLICY (SCALE OF 1 TO 5 WITH 1 BEING VERY LITTLE OR NONE AND 5 BEING A LOT):

1      2      3      4      5

PLEASE DESCRIBE ANY PAST EXPERIENCE WITH PUBLIC POLICY, ADVOCACY WORK, OR POLITICAL CAMPAIGNS:

HAVE YOU PREVIOUSLY PARTICIPATED IN ANY YOUTH LEADERSHIP PROGRAMS?      YES      NO

IF YES, PLEASE LIST AND BRIEFLY DESCRIBE ANY PAST LEADERSHIP PROGRAMS THAT YOU HAVE BEEN PART OF:

DESCRIBE ANY ACTIVITIES, HOBBIES, OR INTERESTS THAT ARE MOST IMPORTANT TO YOU AND HOW THEY HAVE CONTRIBUTED TO YOUR PERSONAL DEVELOPMENT:

**C. PROGRAM MOTIVATION (OR OPTIONAL VIDEO - SEE BELOW)**

WHAT ARE YOU HOPING TO GAIN BY PARTICIPATING IN THE YOUTH PUBLIC PROGRAM?  
(YOU MAY ANSWER IN POINT FORM OR PARAGRAPH, MAXIMUM 100 WORDS)

HOW WOULD YOU APPLY THE KNOWLEDGE AND EXPERIENCE FROM THIS PROGRAM TO YOUR COMMUNITY/IES?  
(YOU MAY ANSWER IN POINT FORM OR PARAGRAPH, MAXIMUM 100 WORDS)

**OPTIONAL VIDEO**

For us to get to know you better, applicants are welcome to share an **optional** video in place of submitting questions in Sections B (Applicant Experience) and C (Program Motivation). Please note that the video length must be less than 2 minutes long. The video is not a mandatory requirement, rather an opportunity for applicants who are more comfortable speaking versus writing to introduce themselves to the selection committee.

The video can be shot on a smartphone, camera, video-camera, or laptop camera and should be sent to us in the form of a viewable link on YouTube. Instructions on uploading a video to YouTube can be found at <http://tiny.cc/youtubehelp>. Please include the viewable link to the video if you wish to submit one.

YOUTUBE LINK TO VIDEO SUBMISSION:

**OTHER**

PLEASE LIST ANY ADDITIONAL INFORMATION YOU WOULD LIKE TO SHARE. ALSO, PLEASE SHARE WITH US INFORMATION ABOUT YOURSELF THAT YOU FEEL IS IMPORTANT OR THAT WE SHOULD TAKE INTO CONSIDERATION.