



# ProAction Cops & Kids Toronto Program Report

To be completed within one month of the program end date and given to your Unit Commander who will forward it to ProAction's staff.

1. Program Name Program No.
2. Program Start and End Date:
3. Type of Program:      Virtual                  Hybrid                  In Person
4. Participants:

<b>Youth:</b>	# Male	Ages:	# Female	Ages:
<b>Youth:</b>	# Non-Specific	Ages:		

	# of Youth at the Start of the Program	# of Youth at the End of the Program
Male Youth		
Female Youth		
Non-Specific Youth		

<b>On Duty Officers:</b>	<b>Off Duty Officers:</b>	<b>Auxiliaries:</b>
<b>Police Volunteers:</b>	<b>Adult Volunteers:</b>	<b>Parent Volunteers:</b>
<b>Total # of On Duty Police Hours:</b>	<b>Total # of Off Duty Police Hours:</b>	
<b>Total # of Volunteer Hours:</b>		

Please list the names of all officers involved in this program including the applying officer. Please attach a separate list if you require additional space.

Officer Rank, First and Last Name	Division	Phone #

**5. How did the program unfold? What goals were achieved?**

**6. Please explain in detail if there were obstacles that you faced with the program and if this resulted in changes to the program that you had not anticipated.**

**7. What would you do differently to improve the program?**

<b>8. Did the youth receive life skills training?</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<b>If so, which skills were formed, and how was this developed?</b>			

<b>9. Did the youth receive any certification(s)?</b>	<b>Yes</b>	<b>No</b>	<b>N/A</b>
<b>If so, please identify which certifications were received and by how many youth</b>			

- 10. Please describe any achievements made by the youth in your program. i.e., job opportunities gained, improved academics, behavioral changes.**
- 11. Please describe how your COVID-19 safety plan was fulfilled and describe any unforeseen obstacles that you encountered:**
- 12. Was a donation received during your program from another source — if so, from whom?**
- 13. How was ProAction's support recognized during the program?**

**14. Did your program receive media attention? If yes, please provide links to any articles or videos:**

**Yes:**            **No:**

**15. Did your program have a social media presence via Facebook, Twitter, Instagram, or other platforms?**

**Yes:**            **No:**

If yes, please provide details below of all accounts that was used to post information about this program — this includes accounts set up specifically for the program itself, or set up more generally at the Division level or in the name(s) of the Officers involved.

<b>Instagram Account(s):</b>	
<b>Twitter Account(s):</b>	
<b>Facebook Account(s):</b>	
<b>TikTok Account(s):</b>	

**NOTE:** Please note these social media links may be shared on ProAction's social media, so please do not include personal links.

**16a. Were pictures taken of the program?**

**Yes:**            **No:**

**b. If yes, have you included signed waivers?**

**Yes:**            **No:**

**17. Police officer surveys.**

For programs receiving under \$5,000, the applying officer is required to complete the police officer survey.

For programs receiving \$5,000 or more, all police officers taking part in programs are required to complete the police officer survey. Did you:

**Administer Survey(s)**            **Yes:**            **No:**

**Attach Survey(s) to this report**   **Yes:**            **No:**

**18. Please complete the following expenditures report and include receipts.**

<b>Individual Item</b> (as per application)	<b>Budget</b> (as per application)	<b>Actual</b>	<b>Receipt(s)</b> <b>Enclosed</b>
<b>Total:</b>			
<b>Refunded to ProAction:</b>			

*Please ensure that all receipts are attached.*

**Reminder: Have you...**

- |   |   |
|---|---|
| <input type="checkbox"/> Completed all pages of the report?             | <input type="checkbox"/> Enclosed copies of waivers?                        |
| <input type="checkbox"/> Attached all program receipts?                 | <input type="checkbox"/> Enclosed copies of media coverage on your program? |
| <input type="checkbox"/> Enclosed copies of the police officer surveys? | <input type="checkbox"/> Enclosed copies of digital photos?                 |

**This report will be referenced when future applications are made.  
Please take time to complete the application in full.**

**Please return this report to your Unit Commander who will sign-off below and forward it to ProAction:**

**Unit Commander's Signature:** \_\_\_\_\_

**Grants Programs  
ProAction Cops & Kids  
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