

1. Program Name

## ProAction Cops & Kids Durham Program Report

To be completed and returned to ProAction within one month of program end date.

Program No.

2. Program Start and End Date:								
3. Type of Program: Virtual				Hybrid	d		In Person	
4. Participants:								
Youth:	# Male		Ages:			# I	Female	Ages:
Youth:	# Non-Sp	ecific	Ages:					
		# of Vout	h at the S	start of the	Progra	m	# of Vout	h at the End of the Program
Male Youth		" of Tout	ii at tiic s	tart or the	riogra	111	n or rout	at the End of the Hogiani
Female Youth	<u></u> h							
Non-Specific								
		•				-		
On Duty Offi	cers:		Off Duty	Off Duty Officers:			Au	xiliaries:
Police Volunteers: Adult			Adult V					rent lunteers:
Total # of Or	Duty Poli	ce Hours:		Total # of Off Duty Police Hours:				
Total # of Volunteer Hours:								
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 R	ank, First	and Last N	ame		Divisio	on		Phone #

September 2021

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?	
	Did the youth receive life skills training? Yes No N/A so, which skills were formed, and how was this developed?	
	old the youth receive any certification(s)?  Yes No N/A f so, please identify which certifications were received and by how many youth	

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 at Yes: No:	tention? If y	es, please provide links to any articles or videos:
15. Did your program have a social me	dia presence	via Facebook, Twitter, Instagram, or other platforms?
Yes: No:		
	ecifically for	nts that was used to post information about this program the program itself, or set up more generally at the involved.
Instagram Account(s):		
Twitter Account(s):		
Facebook Account(s):		
TikTok Account(s):		
<b>NOTE:</b> Please note these social include personal links.	media links n	nay be shared on ProAction's social media, so please do not
16a. Were pictures taken of the progra	ım?	
Yes: No:	••	
b. If yes, have you included signed w	vaivers?	
Yes: No:		
17. Police officer surveys.		
For programs receiving under \$5,000, the	applying off	<u>icer</u> is required to complete the police officer survey.
For programs receiving \$5,000 or more, a police officer survey. Did you:	all police office	cers taking part in programs are required to complete the
Administer Survey(s)	Yes:	No:
Attach Survey(s) to this report	Yes:	No:

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

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

## Please ensure that all receipts are attached.

Re	Reminder: Have you					
	Completed all pages of the form?					
	Attached all program receipts?					
	Enclosed copies of the police officer surveys?					
	Enclosed copies of media coverage?					
	Enclosed copies of photo/video release waivers?					
	Attached all photos/videos?					
	This report will be referenced when future applications are made.  Please take time to complete the application in full.					

## Please return this report to:

Grants Programs
ProAction Cops & Kids
40 College Street, Suite 623
Toronto, Ontario, M5G 2J3