



# ProAction Cops & Kids Halton Region Program Report

To be completed within one month of the program end date and given to the Youth Engagement Team who will forward it S/Sgt. Dave Tutte & ProAction's Grants Programs.

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
<b>Male Youth</b>		
<b>Female Youth</b>		
<b>Non-Specific Youth</b>		

<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:**

