



# “one by one we could all make a difference”

## APPLICATION FORM:

### Statement of Purpose:

The **Louise Russo Youth Awards** recognize youth who exemplify “**the 3R’s**” – **R**espect, **R**esponsibility and the **R**ole of leadership – to help reduce violence in their communities. The Award celebrates personal qualities that make our communities a safe places to live, learn and play.

Applicants can either be one individual, or a team of two or more people. Applicants must be between the ages of 9 and 19 presently enrolled in an Elementary or Secondary School Program. Applications must either be typed or clearly handwritten in black ink in the space provided on the application. The application must only be filled out by the candidate applying for the award and not an adult. If you are a team, one individual should be designated to fill out the application on the team’s behalf.

### **INDIVIDUAL AWARD APPLICANTS: (Complete Section A and C)**

**A.** Name: First \_\_\_\_\_ Middle \_\_\_\_\_  
Last \_\_\_\_\_  
Home address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Home phone number: \_\_\_\_\_  
E-mail address: \_\_\_\_\_  
School/Programme Attending: \_\_\_\_\_  
School/Programme Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Grade level or equivalent: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_



**TEAM/SCHOOL AWARD APPLICANTS: (Complete Section B and C)**

**B.** Name of school/organization/group: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone No.: \_\_\_\_\_

List Contact Person: \_\_\_\_\_  
Contact No.: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Prov.: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Alternate Name & Phone Number: \_\_\_\_\_  
\_\_\_\_\_

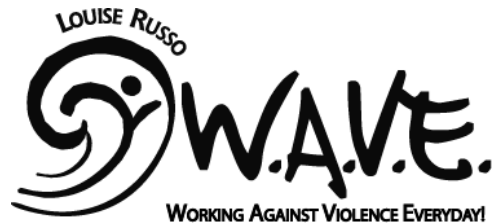
How many students take part in your team? \_\_\_\_\_ (provide numbers)

**C. TO BE COMPLETED BY ALL APPLICANTS.**

List the 2 individuals whose attached letters support and confirm your application. The letters should give examples of how the applicant reflects the Award's statement of purpose and its values.

1. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Contact No.: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

2. Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Organization: \_\_\_\_\_  
Contact No.: \_\_\_\_\_  
E-mail address: \_\_\_\_\_



Application Questions:

1a. Please describe what you and/or your team have done in the last 1 to 5 years to merit the **Louise Russo Youth Award**?

1b. In addition, how do you see your contribution and/or accomplishments continued in the future?

1a. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1b. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Exemplify **“the 3R’s”** – **R**espect, **R**esponsibility and the **R**ole of leadership and how your program and/or actions have affected your school and/or community:

a. **Respect:**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

b. **Responsibility**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_



c. **Role of leadership**

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

3. How have you and/or your team's actions made a difference in your school and/or your community?

---

---

---

---

---

---

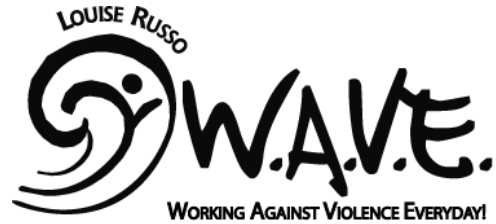
---

---

---

---

4. Please write on a separate sheet of paper a 500 word essay on **“what inspires me/us to believe that one by one we can make a difference”** and attach to your application.



I certify that the information provided on this application form is true and accurate. All information about and on my application will be kept confidential and on file by the charity, Louise Russo W.A.V.E. (Working Against Violence Everyday).

If my application is selected for an award, I authorize my name & photo with award selection details to be publicized. Finally, I understand that I am required to attend the **W.A.V.E. Empowering Youth Day on Wednesday, May 16, 2012** at the **Living Arts Centre in Mississauga, Ontario**. I agree that I will make the necessary adjustment to my schedule to ensure that I will be able to attend this one day ceremony.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

I endorse this application and verify the information:  
(Parent/Guardian/School Official is required if student is under 18 years of age)

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_ Contact No.: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Deadline for Submission:**

Completed applications and supporting material must be received by:  
**Friday, March 30, 2012.**

**Please send your application to:**

**Louise Russo W.A.V.E.** (Working Against Violence Everyday)

P.O. Box 60791  
RPO Jane Wilson  
North York, ON  
M3L 2N5

[www.louiserussowave.ca](http://www.louiserussowave.ca)  
Registered Charitable #84950 2950 RR0001