JEAN MINGUY MEMORIAL RCMP YOUTH ACADEMY

Interested in a career in Policing or other **First Responder careers?**

This is the program for you!

APPLY NOW, SPACE IS LIMITED!

The Jean Minguy Memorial RCMP Youth Academy will be held at the Vernon Army Camp, from Sunday May 25th - Friday May 30th. The RCMP, in partnership with School District 22, have designed this program for students aged 16-18 (as of May 1st), who are interested in police sciences or law enforcement as a potential career. Up to 40 students from ten different school districts will participate in a mini training camp which simulates a police academy environment. It involves seven days where students will be instructed in law, procedures of law, and the role of police officers in the community.

Students who are interested in pursuing a career in law enforcement will receive insight into the training and demands placed on police officers. Students will be personally challenged in their leadership abilities, physical abilities, and mental toughness. The cost is \$350* per student. This fee includes meals, lodging and all supplies for the week. *\$100 of the fee is non-refundable.

All applicants must complete the application package and submit it through their Career Coordinator. It then must be digitally submitted for processing by January 31st to: dmeyer@sd22.bc.ca. Please ensure quality and completeness of digital copy, prior to sending it in.

All potential participants must complete a Fitness Test, which will take place in April. *Students are strongly encouraged to train for this testing to give themselves the best opportunity to succeed.

Who may participate?

- Ages 16 to 18 years of age (as of May 1st)
 Able to pass fitness test
 Able to pass criminal and driving record check
- In good academic standing
 Displays willingness to work
 Good school attendance record
 Interested in Law Enforcement or supporting careers • Recommended by school staff • Non-smoker/Non-vaper

IMMERSIVE EXPERIENCES







PROGRAM QUICK FACTS

WHO CAN APPLY: Ages 16-18 (preference given to Gr 12 students) Min. 16 years of age (by May 1st)

DATES: May 25th-30th, 2025 Applications DUE: Jan 31st COST: \$350 *\$100 non-refundable

How to get more information and Apply:

> Contact your Career Coordinator:

IN SD#22

Seaton/ALP Melanie Jorgensen mjorgensen@sd22.bc.ca 250 306 6806

Kalamalka/VSS Tim Thorpe tthorpe@sd22.bc.ca 250 549 6921

Fulton/CBSS/Crossroads/vLearn **Debbie Meyer** dmeyer@sd22.bc.ca 250 540 1714

OR Go to the SD22 Career Program's website

https://sd22.bc.ca/careers







Jean Minguy Memorial RCMP Youth Academy History and Information

The Jean Minguy Memorial RCMP Youth Academy is held at the Vernon Military Camp. The Youth Academy is dedicated to Cst. Jean Minguy, who lost his life while on duty in June, 2005. Cst. Minguy was an integral part of the RCMP Youth Academy, acting as both a facilitator and a volunteer.

The RCMP, in partnership with School District 22, have designed this Career Programs opportunity for students aged 16-18 (as of May 1st), who are interested in Police Sciences or Law Enforcement as a potential career. It simulates a Police Academy environment in which the students experience a variety of activities that a Police Cadet would have to complete, but in a condensed format. Students receive instruction and lectures on: law, criminal code, police defense tactics, traffic studies, physical training and a variety of other topics. They are involved in a great deal of role playing scenarios and will be required to work in a team capacity.

Fees to participate help pay for meals, lodging and all supplies for the week. Students also receive some clothing and a Certificate of Completion. A <u>mandatory meeting</u> for all successful applicants and their parents will take place on May 7th, at 7pm in the Theatre at Vernon Secondary School.

The Academy will start with drop-off at 10am on Sunday May 25th, and will wrap-up with a celebration ceremony on Friday May 30th, from 3pm-5pm. Family are invited to attend the ceremony.

TO SUBMIT AN APPLICATION

Applicants must complete the application package and submit it through their Career Coordinator. Career Coordinators will then send all applications digitally no later than January 31st to dmeyer@sd22.bc.ca. Please ensure the quality and completeness of the digital copy prior to submission. The application packages will then be sent to our RCMP Liason Officer for review and final approval.

The Liason Officer will notify all successful candidates by email, approximately one month after the application deadline, of their conditional acceptance, pending fitness test* results. All participants must complete a fitness test which will take place in April (dates to follow). Successful applicants will receive an email with additional details at a later date. *Students are strongly encouraged to train for the fitness testing.

The Jean Minguy Memorial RCMP Youth Academy is an excellent learning experience and will be extremely challenging both mentally and physically. If you have any questions or concerns, please contact your Career Coordinator or Mrs. Debbie Meyer at School District #22, dmeyer@sd22.bc.ca (250) 540-1714. Questions may be forwarded to our Liason Officer to answer.

Any questions about acceptance can be directed to our Liason Officer, Constable Neil Horne, Neil.Horne@rcmp-grc.gc.ca or (cell) 250-571-0219.

Thank you for your interest!





The Jean Minguy Memorial RCMP Youth Academy Application Package

me		First Name o			
		First Name		Middle Name	
	School		School District		
	•			ion steps much be complet ons will be returned to the s	
Apı	olication Form - Inclu	ded	If on an IEP - a copy of	of the IEP is included	
	cher Statement of Re uded	commendation -	Minimum one page personal letter in support of this application showing commitment to completing the		
	ent / Guardian Permi iver - Included	ssion and Liability	RCMP Youth Academ High School Transcri		
	ninal Record Check -	Included		of three (3) references	
	dical Questionnaire -		☐ High School Attendance Record		
	eer Coordinator State commendation (Belov		☐ High School Disciplin☐ A Recent Photo☐ Student Field Trip Fo	ne Record rm (Use own Districts)	
	1. Run 2.4 kms (6 2. Perform the m 3. Perform the m	be done at a later date. The laps of a 400 meter track) in leaximum number of body push aximum number of sit-ups in canadian Standardized Test of	ess than 15 minutes. nups (from toes) in 60 secon 60 seconds or perform the n	nds - minimum 15 reps. naximum number of partial	
	Care	eer Coordinator Sta	ntement of Recom	nmendation	
Plea	se agree and che	ck the following stateme	nts.		
	I have read ove	er and attest to the comp	letion of this applicatio	n.	
	I have read the	discipline record and rev	viewed it with the Princ	ipal if there are any issues.	
	I recommend t	his student for the RCMP	Youth Academy.		

Email

Signature

Phone Number

Date

Jean Minguy Memorial RCMP Youth Academy Rules and Regulations

- 1. Once at the academy site, Cadets shall not leave the Vernon Army Cadet Camp property without specific direction from staff.
- 2. Ana-kits and inhalers shall be reported upon arrival; however, will be retained by the cadet. Any other prescriptions shall be securely stored in the student's kit box.
- 3. Alcohol, non-prescription drugs and any other intoxicants are prohibited.
- 4. Smoking and/or vaping is not permitted at the academy at any time.
- 5. Cadets shall not enter the accommodations or rooms of the opposite gender, unless accompanied by a staff member.
- 6. Cadets shall remain in their assigned living quarters from 2130 to 0530 hours, unless specifically directed otherwise by staff.
- 7. Cadets are responsible to ensure the cleanliness and organization of facilities, including assigned Cadet quarters, in accordance with directions from staff. Personal quarters (rooms) will be subject to daily inspections.
- 8. Cadets shall use only those camp facilities assigned to them and not make use of other facilities/amenities without specific direction from a staff member.
- 9. Cadets must, at all times, follow and obey all directions of staff.
- 10. Full disclosure of any injuries must be disclosed to any staff, prior to and during the academy. The disclosure is to ensure your continued health.
- 11. Bullying or harassment of any kind will not be tolerated.

Important Notice for Parents and Cadets - Any cadet who fails to comply with rules, regulations, staff directions or staff guidance, or who become disruptive to the academy, may have their participation in the academy canceled and be immediately returned home at their own expense without any refund of the student fees.

Jean Minguy Memorial RCMP Youth Academy Application





Applicant Information

Please use **PEN** or digitally fill this out

Do you identify as:

First Nations (status or non status) Metis (Citizen of Metis Nation) Inuit

Date	School District		School		Grade
Applicant's First Name		Middle Name		Last Name	
Cell Phone	Email Addre	SS		Birthdate	
Address	City		Prov		Postal
Driver's License #	Care Card #	:		Gender (Fer Other, Prefer	male, Male, Non-binary, not to say)
Family Doctor	Di	ietary restrictions?	if so, pleas	se explain)	
Parent/Guardian 1 Name		Cell Number		Signature	
Parent/Guardian 2 Name		Cell Number		Signature	
Emergency Contact Name		Cell Number			
Parent email to receive upo	lates	-			

Please use **PEN** or digitally fill this out

Please list your hobbies and or interests:
Please list any special skills/experience:
Please describe any volunteer work that you have done: Organization: Duties:
Julies.
Please list courses or lectures you have taken to further your interest in police work:
Vhy do you wish to take part in this program?
explain your view of the police officer's role in society. (Add another page if necessary):

Career Programs

SCHOOL DISTRICT #22 (Vernon)

Teacher Recommendation

Thank you for completing the Teacher Statement of Recommendation regarding the student named below. The information on this reference will be used to determine candidates for the RCMP Youth Academy. A quality response to the general comments section is also important.

Student Name			School				
Teacher Name			Teacher P	hone #			
Subject			Teacher E	imail			
Signature			Date				
		POOR		ТО	ſ	EXCELLENT	
	Attendance / Punctuality	<u></u>	<u> </u>	<u></u>	<u>4</u>	<u></u>	
Comments [
	Work Ethic	<u> </u>	<u> </u>	<u>3</u>	<u></u>	<u></u>	
Comments							
	Attitude	<u></u>	<u> </u>	○3	<u>4</u>	○5	
Comments							
	Initiative / Motivation	<u></u>	<u></u>	<u>_3</u>	_4	<u></u>	
Comments [
	Interpersonal Skills	<u></u>	<u> </u>	○ 3	<u>4</u>	<u></u>	
Comments							
General Comr	ments						

RCMP CRIMINAL RECORD / POLICE INDICES CHECK

Full Given Name			
Minguy Memorial RCMP You rejection of an application, a questioned or objected to by	I Canadian Mounted Police to obtain all inform ith Academy. It is understood that the RCMP v nd whose decision or the criteria, or method o y me, and I will bear no grievance against the F	vill have fina of arriving at RCMP in this	al authority in the approval or such a decision, will not be request.
Note: Any false information dismissal.	n given in this application will be grounds f	or denial, o	or if accepted, immediate
Applicant's Signature		Date (YY/MM/	/DD)
Parent/Guardian's Signature		Date (YY/MM/	/DD)
FOR POLICE USE ONLY: (the	ese check boxes are for police only, please check ap	oplicable box	()
CPIC Persons Check:			
CPIC CNI/CR:			
☐ PIRS/PRIME:			
Driving Record:			
Interview Notes:			
Police Interview/Recommendat	cions:		
Police Interviewer's Name:		Date	
Approved: YES N	0		

PARENT / GUARDIAN PERMISSION AND LIABILITY WAIVER

I,, the gua	rdian / parent of	
	to participate in the JEAN MINGUY	
	ram. I understand that	will
be involved in a variety of law enforcement sin	mulations. I understand that students will be require	d to
provide his / her own transportation to the site	e. I further acknowledge that some physical activity w	vill be
involved and state that	is in good physical condition and is capable	of
participating in strenuous physical activity. I a	lso understand that a medical examination is recomr	mended
but not required, to ensure that will be capable	e of participating in the physical activities. I also unde	erstand
that there could be media coverage of this even	ent which could include a photo, my child's name, ar	nd
comments. This information could show up or	n RCMP advertising or on School District #22 websit	es or
any other school's website. Further, the under	rsigned agrees to assume all risks of participating in	the
JEAN MINGUY MEMORIAL RCMP YOUTH A	ACADEMY, and does hereby remise, release, and fo	rever
discharge the ROYAL CANADIAN MOUNTED	D POLICE, its servants and agents, from any and all	
manner of actions, debts, claims and demand	ls, that said undersigned may have any reason of an	ıy
manner arising out of the said activities organ	ized by the ROYAL CANADIAN MOUNTED POLICE	≣-
VERNON, during the JEAN MINGUY MEMOR	RIAL RCMP YOUTH ACADEMY.	
	date: Year:, Month:	
Day:at the City of	·	
William Co.		
Witness Signature	Candidate's Signature	
Witness Signature	Parent / Guardian Signature	
Witness Signature	Parent / Guardian Two Signature	

MEDICAL QUESTIONNAIRE

Applicant's Name School District #

PLEASE READ THE FOLLOWING CAREFULLY:

Police officers must maintain a high level of fitness to perform their duties effectively and professionally. At the RCMP Youth Academy, you will be expected to be in good condition and **injury free**.

The physical components of the RCMP Youth Academy include a conditioning program, participation in team sport games, and simulations of police scenarios, involving chasing, controlling and apprehending suspects.

The students will be exposed to a simulated physical ability requirement evaluation, which is currently required for RCMP entry. This is a physically rigorous test. Completion of this test requires participants to perform at near maximum heart rates, challenge upper body strength, muscular endurance and coordination skills.

It is the recommendation of the RCMP Youth Academy to undergo a medical examination by a physician if the applicant or the guardians have any concerns.

Read and honestly answer each of the following questions. Any information regarding injuries must be volunteered.

If it is not, and the injury surfaces during the activities at the RCMP Youth Academy, the student may asked to leave.

1. List any injuries or illnesses affecting physical activity.
2. Have you been under a doctor's care for any reason within the preceding two (2) years? Yes If yes, explain:
3. Do you have a bone or joint problem that could be aggravated by physical activity? Yes If yes, explain:
4. Do you feel pain in your chest while you exercise physically?
5. Do you experience dizziness, or do you ever lose consciousness?
6. Are you currently on medication? Yes If yes, explain:
7. Do you smoke/vape? Please note that smoking/vaping are prohibited
8. Please list any serious allergies.
Student Signature: Parent/Guardian Signature:
Falent/Qualulan signature.

SD22

PARENT/CAREGIVER FIELD TRIP CONSENT FORM

		Please return by:	
Name of student:			
FIELD TRIP INFORMATION L	_evel Four (overnight, hig	h risk)	
associated with the activities of the progr drills, and police tactics training. They will Accidents can be the result of the nature School Board, or its employees or agents	ram. Students will be engag I be participating in role pla of the activity and can occu , or the facility where the a	ronment. Due to the nature of the program there aring in a variety of physical training, including self de ying scenarios where the students will take on the rair with or without any fault on either the part of the ctivity is taking place. By allowing your son/daughte se activities, as described above, are suitable for yo	fense training, physical fitnes ole of a police officer. student, the RCMP or the er to participate in this activit
Level Four Trip:			
	or may not include: canoein	or six nights, utilizing the facilities there, and will tal ig on Okanagan Lake, traveling for meals, paint-balli consultation with the Principal.	
On this field trip, the supervision ratio Please see additional supervision infor	•	s to 1 adult to 5 students to 1 adult.	
I understand that partic	ipation in this trip is option	onal and a privilege.	
By signing this agreeme	nt, I hereby give my cons	sent to allow my child to participate in this scho	ool trip.
I understand this trip wi	ill cost the following: \$		
If you have any concerns around	d the cost of this trip, ref	fer to the school district's Policy 2.24.0 Financi	al Hardship.
lease list below any allergies or ailme	nts your child is subject t	o and precautions to be taken:	
lease list additional emergency contacts i	in the event that a family m	ember cannot be reached:	
Full Name		Phone #	
Full Name		Phone #	
By signing this I agree to the followi	ing:	Filolie #	
I am aware and understand that pa additional dangers and risks exist, i	articipation in field trips ma including, but not limited to	y involve inherent risks, dangers and hazards. I am a b, injury, damage to personal property, varying wea eseeable events. I agree the activities described in t	ther, encounters with
		ndditional unforeseen financial expenses required for the board, its employees and agents for any such ex	
Both my child and I understand tha		t applies on all field trips. The use of alcohol or drug nts engaging in these behaviours are liable to be ser	
Parent/Caregiver signature	Date	Student signature (if applicable)	Date