



Central Okanagan
Public Schools
Together We Learn

Central Okanagan Public Schools

LEADERSHIP IN ACTION AT CAMP OC (2 or 4 credits)

LAST NAME: _____ FIRST NAME: _____ USUAL FIRST NAME: _____

SCHOOL: _____ CURRENT GRADE: _____

PROGRAM: **LEADERSHIP IN ACTION AT CAMP OC**

PROGRAM START/END: **June 2026 through August 28, 2026**

MANDATORY ORIENTATION: **Tuesday, June 23 from 5:00pm – 6:30pm (details to follow)**

LOCATION: **Okanagan College – Kelowna Campus, 1000 KLO Road**

DEADLINE TO APPLY: **Friday, May 22nd**

PROGRAM OUTLINE: The Leadership in Action program at Camp OC is designed to empower high school students by providing them with the tools to become confident, effective leaders. Over the course of the program, participants will engage in a range of interactive learning experiences that cover leadership fundamentals, conflict resolution skills, communication strategies, and teamwork dynamics.

By applying these skills in real-life camp activities in the classroom, participants will build their leadership abilities while receiving feedback, helping them reflect on their strengths and areas for improvement. This program offers a comprehensive foundation for students to become empowered leaders, ready to make a positive impact in their communities and beyond.

Four options (*please use check box to indicate which one you are applying for*):

A. **IDS11A New students** who have **NOT** participated in Leadership in Action Program in the past:

- 15 hours of coursework (12 online & 3 in-person) + 1 week volunteering at Camp OC
(2 credits)
- 15 hours of coursework (12 online & 3 in-person) + 2 (or more) weeks volunteering at Camp OC
(4 credits)

B. **IDS12A Returning students** who have participated in Leadership in Action Program in the past:

- 15 hours of coursework (12 online & 3 in-person) + 1 week volunteering at Camp OC
(2 credits)
- 15 hours of coursework (12 online & 3 in-person) + 2 (or more) weeks volunteering at Camp OC
(4 credits)

Note: To Volunteer at Camp OC and earn work experience hours toward graduation (non-credit - no coursework) ***please use Camp OC volunteer application, not this form.***

CENTRAL OKANAGAN PUBLIC SCHOOLS APPLICATION FORM

PLEASE PRINT CLEARLY

Name _____
Last Name First Name Usual First Name

Address _____ City _____

Home Phone _____ Student Cell _____ Postal Code _____

Date of Birth (mm/dd/yyyy) _____ Social Insurance Number: _____

Canadian Citizen* Permanent Resident Work/Study Permit/Intl Funding Elig

**Students must be a Canadian Citizen, Permanent Resident, or be Work/Study Permit/Intl Funding Elig to earn high school credits. Social insurance number must be provided.*

Student email address: _____

NOT SD23 SCHOOL EMAIL, NO PARENT EMAIL, (USE GMAIL, HOTMAIL, ICLOUD ETC.) Students accepted into the program will be communicated with directly by Okanagan College (parent emails will not be included). Students must check their email inbox regularly for updates and information.

Are you currently on an IEP or Learning Plan? No Yes If yes, please include with application

Parent / Guardian Contact _____

Parent/Guardian email address: _____

Home Phone _____ Work/Cell _____

Emergency Contact Person _____

Home Phone _____ Work/Cell _____

I/We:

- (a) certify the information given in this application is true and complete to the best of my knowledge and understand that, if selected for the Leadership in Action Program, falsified statements may be reason for removal. I authorize investigation of all statements contained herein and the references listed in this application.
- (b) allow SD23 Career-Life Programs to communicate to all Post-Secondary Institutions for educational purposes relating to my selected field of study.
- (c) allow SD23 Career-Life Programs to use any work or school related picture of myself for the purpose of promotion and communication of the program.
- (d) acknowledge that students accepted into this program will be at the designated site provided by the training partner

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

CONSENT TO RELEASE INFORMATION contained in student academic records

In order to comply with privacy legislation and College policy, any student who wishes Okanagan College to release their information to a third party must complete and sign this form or fill in the online form in their myOkanagan account.

STUDENT PROFILE

Legal Last Name: _____ Legal First Name: _____

OC Student ID: N/A Date of Birth (dd/mm/yy): _____

Add Release (only one person per release)

Name (First and Last): Central Okanagan Public Schools - Career Life Programs

Relationship to you:

Citizenship & Immigration Canada

Friend

School District

Other: _____

Employer

Lawyer

Sponsor

Family

Parent

Spouse

Note: Select "All" and enter the effective dates to consent all of the items to be released. Or select specific items and enter the effective dates to consent to the specified items to be released.

Effective Dates (maximum of 2 years): From: _____ To: _____
(today's date) (two years from today's date)

INFORMATION TO RELEASE

<p><input checked="" type="checkbox"/> All current information listed below</p> <p><input type="checkbox"/> Name</p> <p><input type="checkbox"/> Address</p> <p><input type="checkbox"/> Phone</p> <p><input type="checkbox"/> Email</p>	<p><input type="checkbox"/> Status of application <i>Application decision, outstanding items and deadlines</i></p> <p><input type="checkbox"/> Transcript of academic record and confirmation of enrolment <i>Official or unofficial transcript and related information, including grades, academic standing, and current, past, future registrations. Transcripts may include your name, address, and student ID</i></p> <p><input type="checkbox"/> Media information <i>All images and sound recordings in any media for any purpose</i></p> <p><input type="checkbox"/> Other:</p> <p>_____</p> <p>_____</p>
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You may rescind or amend this authorization in writing or in your myOkanagan account at any time.

Signature: _____ Date: _____

TEACHER RECOMMENDATION

The information in this recommendation will be used to determine candidate's suitability for the Leadership in Action Dual Credit Program. A response to the general comments section is also appreciated.

Student Name: _____

Teacher: _____ **Class:** _____

School: _____ **Teacher Email:** _____

	<i>Excellent</i>	<i>Good</i>	<i>Fair</i>	<i>Needs Improvement</i>
1. Attendance/Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<hr/>				
2. Work Ethic and Attitude	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<hr/>				
3. Shows Initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<hr/>				
4. Ability to verbally communicate with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<hr/>				
5. Readiness to take a leadership role and to lead younger students	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<hr/>				
6. Ability to follow rules/structure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				
<hr/>				
7. General Comments:				

Teacher Signature: _____ **Date:** _____