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# TRAILS YOUTH INITIATIVES REFERRAL FORM

(to be completed by a teacher or administrator at your child's school)

Trails Youth Initiatives is a private not–for–profit organization that challenges and equips vulnerable youth from Toronto to become contributing members of their communities. At Trails, we strive to ensure youth can pursue their hopes, dreams and aspirations, free of barriers based on race, gender, economic status or geography, so that they can achieve success and meaningfully contribute to their community.

We believe that early intervention, the right amount of guidance, support and structure, can change everything. Trails is about prevention: helping our participants identify their strengths and imbuing them with a desire to complete high school, seek further education and/or productive careers.

As a participant of Trails, each child commits to spend 10-12 days at Trails in the summer, and one weekend a month throughout the school year, for four years.

We trust that as educators you know your students well and can help us by completing this form as accurately and as thoroughly as possible. The questions on this application are there to help us assess and evaluate each individual through the process of selection. Please take the time to answer all the questions that apply to this student. We hope that you will be open to answering the questions as honestly and thoroughly as possible. Please know that this information is kept confidential.

This application is one of several forms that will help us understand the applicant and how they would benefit from Trails. It is important that you fill out this form and return it to us as soon as possible following the completion of the student's Application Form. **Offers of conditional acceptance will be sent to applicant families via email no later than March 15th.** 

\*Note: A digital version of this form can be found on our website at:

https://trails.ca/programs/nominate/



trails.ca/programs/nominate



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Today's Date:	
•	(Month/Day/Year)

## **Referring Individual's Information**

			Referring individuals	illiorillalion					
Your name:	name: Your relationship with the applicant:								
Phone:	(	)	Ema	Email:					
Name of So	chool:								
			A						
	Applicant Information								
Name:			Gender:	Age:	Birth Date:				
Student OE	Student OEN (required information upon registration):								
Applicant's School: Grade:									



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# Please answer the following questions as honestly and thoroughly as possible.

1. Please share your insights about the categories/questions below:

Academic performance:					
below provincial standard	1	2	3	4	surpasses provincial standard
Social-Emotional skills:					
undeveloped	1	2	3	4	highly developed
School attendance:					
inconsistent	1	2	3	4	consistent
Involvement in extracurricular activities (e.g. sports, clubs, student council, etc.):					
no involvement	1	2	3	4	very involved
How would you describe the involvement/communication of the student's parent(s) or guardian(s)?					
limited involvement/ communication	1	2	3	4	high degree of involvement/ communication
How well does the student communicate with you and or other teachers/principals?					
limited effectiveness	1	2	3	4	high degree of effectiveness
<ul> <li>2. What role does this steams, etc.)?</li> <li>Leader</li> <li>follower</li> <li>Supporter</li> <li>Contributor</li> <li>Non participatory</li> <li>Other:</li> </ul>	tuder	nt ass	sume	in a ç	group setting within the school (recess, class,



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3.		s student able to resolve conflict, express their ideas and self regulate in the com setting? If not, please explain.
4.	What	is the student's patterned response to conflict and feedback? Please select one.
		<b>Fight</b> : reacts instantly without giving much thought to actions or consequences (i.e. loses temper, starts yelling and does/says things they regret or do not mean).
		<b>Flight:</b> backs away and avoids the conflict. Believes that if they ignore it, the situation will go away.
		<b>Freeze</b> : backs off and does not fight back nor run away. They are not sure how to react, so say nothing and go along.
		<b>Face</b> : are open to resolving the conflict calmly and productively. Works toward creating a solution by listening to the other person's point of view and expresses their own point of view responsibly.
5.		loes the student typically express their emotions (frustration, sadness, hension,etc.)?
		Yells/Swear   Withdraws
		Shuts down
		Other:
		J Other:



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6.	To your knowledge, has the student been diagnosed with a learning disability of exceptionality through the IPRC? If so, please describe the classroom setting a considerations (i.e. do they require any support systems at school?).	
7.	Has the student been suspended from school within the last two years? How of what reason(s)?	ten and for
8.	To your knowledge has the student been in any form of therapy or counseling (fother)? Please explain.	amily or
9.	Do you encourage and support the student's choice to be part of Trails? If not, explain?	olease



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- 10. To your knowledge, does the student appear to really want to join Trails for four years?
- 11. In what ways do you think this student would be appropriate for Trails? Please provide some key behaviours, interests and/or potential external barriers (known or suspected).

12. Is there anything else you think we should know about the student that would help us support them during their time here?