



TOOLS FOR TOLERANCE® – Law Enforcement
Individual Application

PERSONAL DATA (Please print or type)

Name (as appears on travel document)
First _____ Last _____
Position _____
Service/College _____
Phone (b) _____ (h) _____
Sex _____
E-mail _____
Fax _____
Address _____
City _____
Province _____
Postal Code _____

Please complete the following (feel free to use additional space, if required)

- I. What are your reasons for wanting to participate in the Tools for Tolerance® for Law Enforcement Professionals program? What do you expect to gain personally and professionally from the program?

- II. What do you think are the three key challenges facing law enforcement professionals today?

- III. Please submit a short bio including any leadership initiatives you have participated in or have developed within your place of employment, charitable work, etc.

Please note any special needs you may have. We shall make every effort to assist you.

Indicate which program you are applying for (workshop deadlines are listed on website at www.fswc.ca):

- Tools I:** Dec. 10 – 11 '07
 Command Staff: March 3 – 5 '08

Who introduced you to the Tools for Tolerance® program? _____

APPLICANT'S ASSURANCE STATEMENT

I understand that if I am selected to attend the Tools for Tolerance® for Law Enforcement program, I am making a serious commitment of time and energy to the intensive conference and all follow-up activities for a period of one year. I assure that:

- I will attend the workshop and take part in all learning activities through active class participation.
- I will maintain continued communication with the Friends of Simon Wiesenthal Center, Tools for Tolerance® staff and other participants through the Tools for Tolerance® web site and virtual network.
- I will send an action plan to the Tools coordinator within 1 month of return and then send a follow-up detailing what actions have been actualized as a result of the Tools for Tolerance® course within 10 months.

Signature

Date

⇒ Please note that *Friends of Simon Wiesenthal Center* requires credit card information from each participant, if selected for the course.

⇒ Participants who cannot attend must notify *Friends of Simon Wiesenthal Center* in writing as soon as possible. If a substitute participant can not be arranged within 10 days prior to the program's commencement, a \$100 charge will be applied to the credit card provided as security at that time. This is due to the stipulations of the air carrier.

⇒ A \$50 (plus GST) cost/participant administration fee will be charged to your credit card on behalf of the travel agent.

⇒ All-Inclusive cancellation insurance and air travel must be purchased through FSWC's travel agent once selected for the course.

⇒ *Friends of Simon Wiesenthal Center* requires you to submit your boarding passes from Canada to Los Angeles for our accounting department.

⇒ all applications will be reviewed and those accepted will be sent an *Acceptance Letter Return Form*. Those not accepted will be added to a list of potential contacts for future programming in Canada and United States.

⇒ Participants are strongly encouraged to attend the pre-trip meeting at FSWC's office.

NOTE: PARTICIPANTS MUST ATTEND THE COMPLETE PROGRAM.

As a participant in the Tools for Tolerance® Program, your name will be shared with other attendees. In addition, all photographs taken of you and/or any of your written comments are the possession of Friends of Simon Wiesenthal Center and may be used for promotional purposes.

Please complete and mail or fax back to:

Shawna Spiegelman

Project Coordinator, Tools for Tolerance®

Friends of Simon Wiesenthal Center

902 - 5075 Yonge Street

Toronto, Ontario, M2N 6C6

tel: 416.864.9735 ext. 33 -- fax: 416.864.1083 -- toll free: 1.866.864.9735

sspiegelman@fswc.ca www.fswc.ca

THANK YOU FOR YOUR APPLICATION.

THOSE ACCEPTED TO THE TOOLS FOR TOLERANCE® FOR PROFESSIONALS PROGRAM WILL BE NOTIFIED BY EMAIL. UNACCEPTED APPLICANTS WILL BE INCLUDED IN FSWC'S DATA BASE FOR NOTIFICATION REGARDING FUTURE PROGRAMMING OPPORTUNITIES.