

Young Change-Makers: APPLICATION FORM

Young Change-Makers is a summer school and leadership development programme for 16-18-year olds who are interested in helping in their community to support others and create change.

You can apply for a five-day programme (a summer school) or a year-long opportunity that includes the summer school but also helps you develop your knowledge, your skills and your networks with others during the following year.

The summer five-day programme will mostly be based at St Christopher's Hospice in Sydenham, with one day spent in Croydon.

During the week you will learn about healthcare, your community, helping others and how we can be proactive and part of a collaborative effort to support one another with end-of-life experiences.

The year-long opportunity includes the five-day programme and also online and selected weekend mornings during the term. These will be flexible to the needs of attendees. During this time you'll work on your personal leadership and development, particularly within the community.

Please answer the questions below to be considered for a place. We ask the questions to help us understand more about you and your interests in taking part. There is no right answer as we are keen to hear about your thoughts and interests. However, we will be reviewing the answers to help us decide who would be the best fit with the programme.

Please complete and return by 5.00pm, Thursday 26th May to:

Lucy Passmore
St Christopher's Hospice, 51-59 Lawrie Park Road,
London SE26 6DZ
Email: l.passmore@stchristophers.org.uk
Phone: 020 8768 4656

Section 1 – Personal Information

SUMMER SCHOOL 2022 <i>(please x the preferred programme)</i>	x One week only – 18-22 July In-person introduction to key principles and concepts around community and end of life – 5 days	
	x Leadership programme Blended in-person/online delivery taking a total of 10 days. Including the 5-day programme 18 th July and ending in June 2023.	
FULL NAME		
DATE OF BIRTH <i>(Applicants must be 16 on or before 31/06/2022)</i>		
EMAIL		
HOME ADDRESS <i>(for correspondence)</i>		
HOME TEL	MOBILE TEL	
EMERGENCY CONTACT NAME	EMERGENCY CONTACT NUMBER	
CURRENT SCHOOL OR COLLEGE		
SCHOOL ADDRESS		
SCHOOL/COLLEGE CONTACT NAME		
SCHOOL/COLLEGE CONTACT TEL	EMAIL	

Section 2: Personal Statement

1. Please tell us why you would like a place and what you hope to get from this experience (no more than 200 words)

2. Can you tell us who you think is, or has been, a good change maker or leader and why? You can share with us a well-known person or someone that you know personally, who we might not know, or a social movement or organisation making change (no more than 200 words)

3. What three words would you use to describe community?

1.

2.

3.

4. Please describe something you'd like to change in your community and how you'd want to do it (no more than 200 words)

5. Please give an example of when you have supported someone else when they were going through a difficult time, decision or question (no more than 200 words)

6. Please tell us your thoughts about what you'd like to do in the future (no more than 200 words)

7. Is there anything we need to know about you? (this is optional and you do not have to share this with us and it will not be considered as part of eligibility criteria)

Is there anything you might find upsetting to discuss? If so please do mention it here and we will make sure it is considered during the sessions or that you have additional support.

If you have experienced someone's death is there anything you'd like to tell us about your experience?

Are you on any medication?

Have you got any learning needs you'd like to tell us about? Or any preference for learning support?

8. Please accept my application for the summer school

Signature _____

St Christopher's CARE
51-59 Lawrie Park Road, Sydenham London SE26 6DZ
T 020 8768 4656
E education@stchristophers.org.uk
www.stchristophers.org.uk/about-care

Section 3 – Endorsements

To be considered for interview you must obtain signatures of endorsement from both your parent or guardian and your Head Teacher/Head of Year/Head of Sixth Form.

We confirm that (*Name of student*) _____ is highly motivated and available to attend St Christopher’s Hospice for the duration of the Summer School on the 5 days identified in July 2022:

Name of Parent/Guardian: _____ **Signature:** _____ **Date:** _____

Name of Head Teacher/ Head of Year/Head of Sixth Form: _____ **Signature:** _____ **Date:** _____

Thank you for your application. If you have any questions, please contact Lucy Passmore on Tel: 0208 768 4656 or Email: l.passmore@stchristophers.org.uk