Rising Angels
REBOOT Computer Support Program for Survivors

info@risingangels.net
risingangels.net

About Rising Angels

Our Mission is to bring education about commercial sexual exploitation to professionals and the public, and to provide supportive services and safe environments to women affected by commercial sexual exploitation, allowing them to experience physical, mental, social and spiritual restoration in their lives. Our services include:

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Awareness
- Education, Advocacy & Prevention
- Churches
- Schools
- Police Forces
- Health Care Professionals
- Citizen Groups

Restorative Care
- Crisis Intervention
- Trauma Informed Care
- Mentoring & Life Coaching
- Street Outreach

Application

The REBOOT Computer Support Program is available to females aged 16 and over who have been affected by commercial sexual exploitation, sex trafficking a/o prostitution and who have exited their exploitative situation for a minimum of 6 months.

Please note this fund can only be accessed by referral from a Canadian registered charity which has been providing support services to the candidate for a minimum of 6 months. **The REBOOT Computer Support Program may be approved only once per candidate.**

Please be advised this computer support program is only available where the candidate has been accepted by a Canadian designated educational institution or a member school of the National Association of Career Colleges to complete her secondary school diploma OR to complete a post-secondary diploma program OR to learn a trade. We are unable to accept applications for stand-alone courses.

The successful candidate will receive, via the referring charity, a notebook computer, carry bag, printer, and USB memory stick

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Timeline

Computer Packages will be distributed to approved candidates as funds allow. Once an application has been submitted, you will receive a confirmation email when it has been received. **A decision will be advised within 15 (fifteen) days of receipt of the application.**

Please allow ample time for consideration and processing of the application, prior to the commencement of the school semester.

The computer package will ONLY be provided by the registered charity to the potential recipient to be used for its main intended purpose, as outlined in the accepted referral.

PLEASE NOTE: You have all of the following included in your application:

1) Referral letter from the executive director or staff member from the referring charity
2) A copy of the Candidate's Acceptance Letter from the Educational Institution
3) Proof of Payment for the upcoming semester
4) Completed Agreement Form **(see page 6 of this document)**

The referral letter from the charity should explain the following:
- A brief description of your charity and the work you are involved in
- How the person making the referral knows the candidate
- A brief understanding of how the candidate has experienced sexual exploitation
- Why the person making the referral believes the candidate is a good fit for this program
- Any additional information you find relevant to this application for funding

PLEASE ENSURE: You have all of the following included in your application:
1. Referral letter from the referring charity **(see above)**
2. Completed REBOOT Application form **(pages 3-5 of this document)**
3. A copy of the Candidate's Acceptance Letter from the Educational Institution
4. Proof of Payment for the upcoming semester
5. Completed Agreement Form **(page 6 of this document)**

Please note, the Follow-Up Questionnaire (see page 7 & 8) must be sent within 60 days and 180 days, respectively, of receipt of the computer equipment *

Please email all completed applications to Rising Angels at:
info@risingangels.net Type "REBOOT Program Application Attached" in the Subject Line of the email.

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Application Form

To be completed by the registered charity making the referral.
Note: For the purposes of this application, the survivor who is being considered for the Program shall be referred to as the Candidate.

Name of charity making the referral:

Name & title of contact person from the charity:

Charity website:

Contact person's phone number:

Contact person's mailing address:

Contact person's email address:

How did you hear about the Rising Angels REBOOT Computer Support Program?

☐ Our charity has applied before ☐ From another Organization

☐ In an email from Rising Angels ☐ Via Rising Angels website ☐ Other

The following questions pertain to the candidate herself.

Candidate's Name: Candidate's date of birth:

Where does the candidate currently reside?

Is the candidate a Canadian citizen? ☐ Yes ☐ No

If the candidate is not a Canadian citizen or has immigrated to Canada, what is their status in the country (e.g. on a visitor visa, work/study permit, refugee status, permanent resident, immigrant, etc.)?

Is the candidate of indigenous descent? ☐ Yes ☐ No If yes, do they have official Treaty status? ☐ Yes ☐ No

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Application Form

Please provide brief details about the candidate's support system.

Please describe the type and length of the relationship between the candidate and the supporting charity. Provide as much detail as you are comfortable with.

Please describe how you plan to support the candidate in their goal to pursue schooling.

Please describe why you feel the candidate would benefit from accessing this program at this time.

Which educational institution has the candidate been accepted to?

Please provide the name of the program the candidate has been accepted to & its expected duration.

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Application Form

Please provide some information about the candidate's career goals.

Please include any additional information you feel may be relevant to this application.

Submit your application form to info@risingangels.net
Before submitting your application form, please remember:
➢ Referral letter from the referring charity (see above)
➢ Completed REBOOT Application form (pages 3-5 of this document)
➢ A copy of the Applicant's Acceptance Letter from the Educational Institution, ➢ Proof of Payment for the upcoming semester
➢ Completed Agreement Form (page 6 of this document)

Please note that incomplete applications will not be processed. Please include all required information for the benefit of you and your client.

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Agreement Form

I, _____ (staff person), on behalf of _____(referring charity), agree that should a REBOOT Computer Package be awarded to (candidate), the following will be submitted to Rising Angels within 60 days of receipt of the package:

a) a completed Follow-Up Questionnaire
b) a written declaration from the recipient confirming her receipt of the REBOOT Computer Package

and the following will be submitted to Rising Angels within 6 (six) months of receipt of the package:

a) A second completed Follow-Up Questionnaire

Signature	Witness
Name	Name
Date	

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Follow-up Questionnaire

Part 1: To be completed by the contact person from the referring charity:

Name of recipient who received the computer package:

Name of charity who made the referral:

Contact person from the charity:

Contact person's number: Email:

1) Was the REBOOT computer package used by the recipient for its intended purpose?

Yes No Partly

2) Was there anything about the program (the way it was dispersed, timelines) that made it difficult for the recipient to access the program appropriately?

3) In your opinion, does the computer package provided meet the recipient's educational needs?

4) Do you have any suggestions for how we can improve the process of administering the program and/or the program itself?

Signature
(On behalf of the charity)

Date

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Follow-up Questionnaire

Part 2: to be completed by the recipient on the following page

1) As you've proceeded, have your education or career goals changed at all?

2) Is your schooling proceeding as you hoped?

3) Has the experience been what you expected?

4) Does the computer package provided meet your educational needs?

5) Do you have any suggestions how we can improve the process of administering the program and/or the program itself?

Signature
(Recipient)

Date