



**The Students
Commission**

Centre of Excellence for
Youth Engagement



INFLUENCE IN ACTION invitation

The Students Commission

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www.tgmag.ca

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Eastern Hub Office
Kyle MacNevin, Susan Reid
c/o St. Thomas University,
51 Dineen Dr., Fredericton, NB
E3B 5G3 (505) 452-0456

**CENTRE of EXCELLENCE FOR
YOUTH ENGAGEMENT
PARTNERS**

**Brock University
Lifespan Development Centre**
Brock University, c/o Dr. Linda
Rose-Krasnor, Dept. of
Psychology, 500 Glenridge Ave.
St. Catharines, ON, L2S 3A1

**Youth Launch /
Nutana Integrated
School-linked Services**
c/o Nutana Collegiate
411 Eleventh St East
Saskatoon, SK, S7N 0E9

**Wilfrid Laurier University's
Community Psychology
Program**
c/o Department of Psychology
75 University Avenue West
Waterloo, ON, N2L 3C5

**Youth Net / Réseau Ado (YN/RA)
The Children's Hospital of
Eastern Ontario (CHEO)**
401 Smyth Rd.
Ottawa, ON, K1H 8L1
www.youthnet.on.ca
www.cheo.on.ca

**City of Vancouver
Youth Outreach Team**
453 West 12th Avenue
Vancouver, BC, V5Y 1V4
www.vancouveryouth.ca

St. Thomas University
Centre of Research for Youth at
Risk, c/o Dr. Susan Reid
51 Dineen Dr., Fredericton, NB
E3B 5G3

St. Mary's University
c/o Dr. David Bourgeois, Dept. of
Psychology, 1800 Argyle St.,
Halifax, NS B3J 3N8

**Town Youth Participation
Strategies/Youth Centres
Canada**
P.O. Box 729, Merrickville, ON
K0G 1N0

YouCan
c/o St. Paul's University, 223 Main
St., Ottawa, ON K1S 1C5

Letter of Agreement for Influence in Action Project

_____ (Insert
School/Organization Name Here or School Signing Authority or Community Centre
name) gives permission for the Students Commission of Canada, lead to the Centre of
Excellence for Youth Engagement, to conduct the program Influence in Action,
which we have reviewed, and evaluate it through a quiz given to students during the
program, which we have also reviewed.

_____ (Insert Your School/Community
Centre/Agency)

Signing Authority Name: _____
(Please Print)

Signing Authority Signature: _____

Date: _____

****Please return this form to The Students Commission representative in your area,
or fax to 416 597-0661
or pdf and email to Sharif Mahdy – sharifm@tgmag.ca**

Any questions or concerns, please call Sharif Mahdy at 416 597 8297.

Program Outline, Curriculum, Quiz are available for review at
www.studentscommission.ca/drugbuzz