

ATHLETE DEVELOPMENT PROGRAM APPLICATION FORM

NAME: _____

FORM GROUP IN 2015 _____

SPORT: _____

REPRESENTATION:

Any selection to represent your sport at a National, State or Region level (e.g. Interleague teams, Team Vic)

CURRENT CLUB/S or TEAMS

Local/Domestic: _____ Under _____

Representative: _____ Under _____

RECENT ACHIEVEMENTS: Detail best achievements in past year/season. Include event, date, team or individual awards or other levels of performance. (Please attach additional documentation if applicable)

CURRENT WEEKLY TRAINING COMMITMENTS WITH CLUBS AND COACHES

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Before School							
After School							

Teacher References: This needs to be completed by your current Year 8 teacher for each subject

PASE

Participation in Physical Education classes

Never ←————→ Always

Effort in Physical Education classes

Requires attention ←————→ Excellent

Any additional information: _____

Year 8 Physical Education teacher signature: _____ Date: _____

ENGLISH

Application in English classes

Requires attention ←————→ Excellenc

Standard of work in English classes

Requires attention ←————→ Excellent

Any additional information: _____

Year 8 English teacher signature: _____ Date: _____

Maths

Application in Maths classes

Requires attention ←————→ Excellent

Standard of work in Maths classes

Requires attention ←————→ Excellent

Any additional information: _____

Year 8 Maths teacher signature: _____ Date: _____

Your Goals.

Sporting Goals: Describe briefly your future goals in your sport. Please include goals for 2015-16 plus longer term goals

Academic Goals (this includes subjects for improvement and future academic studies)

List the achievements that make you feel most proud. These may be positions of responsibilities you have held or awards you have earned etc.

Student-Athlete & Parent Signatures

Please ensure all details are correct to the best of your knowledge and sign in the space below:

(Student-Athlete's Signature) _____ (Date) _____

(Parent/Carer Signature) _____ (Date) _____