

APPLICATION FORM

Gordonvale State High School

SUMMIT Program - Academic Excellence and Extension Program

Due Date: Friday, 28th July 2017

SECTION A – Student Family Details

STUDENT'S NAME: (In full)		SEX: Male / Female
PRESENT SCHOOL:	PRESENT YEAR LEVEL:	DATE OF BIRTH:
PARENTS/GUARDIANS:		
HOME ADDRESS:		
POSTAL ADDRESS: (If different from above)		
EMAIL ADDRESS:		
PHONE: HOME:	MOBILE:	WORK:

SECTION B – Educational Background

Please list all the schools attended for the last 3 years

School Year	Grade	School	Location
This year			

PLEASE SUPPLY COPIES OF THE FOLLOWING WHEN SUBMITTING THE APPLICATION:

- Latest NAPLAN results (year 5)
- Last two End of Semester reports
- These are very important in determining the suitability of the applicant

SECTION C – About the Student

Please outline the extra and co-curricular activities in which you are involved e.g. school captain, Red Cross door knock appeal. Please note - you are not expected to fill in every box. This is a guide as you may have other skills and attributes valuable for selection into the Summit Program.

PROGRAM	YOUR SKILLS / ATTRIBUTES
Leadership Roles	
Creative Industries (Visual Art, Dance, Music, Drama)	
Public Speaking and Debating	
Information Technology	
Sport	
Community Service Eg. Fundraising	
Other	

SECTION D – Recommendations

STUDENT ASPIRATION (written by the student)

What educational and career goals do you have?

STUDENT/PARENT OR GUARDIAN COMMENTS (Optional)

Use this space to provide any relevant information that should be considered when evaluating this application?

CURRENT CLASS TEACHER AND /OR PRINCIPAL STATEMENT OF SUPPORT

Short statement from class teacher and/or Principal endorsing the student.

I endorse this application for the Summit Program at Gordonvale State High School.

Signed:

Date:

Name:

Teacher / Principal
(circle correct title)

SECTION E - Declaration

I declare that the information submitted in this Application for the entry into the Gordonvale SHS Summit Academic Excellence and Extension Program is complete and correct. I understand that the submission of incorrect or misleading information may result in the termination of the application for entry into this program.

Student Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____

SUBMISSION CHECKLIST

Have you included?

- A current and active email address and contact phone number
- A copy of all relevant school certificates, reports and NAPLAN results to support this application
- Signed statement of endorsement for teacher/s and or Principal

FOR OFFICE USE ONLY

Date Received Stamp

Attachment Checklist:

Last two End of Semester Reports	Yes	No
Latest NAPLAN results	Yes	No
Other Supporting Documentation provided	Yes	No
Year 6 endorsement signed	Yes	No

FURTHER COMMENTS
