



EXCELLENCE - INNOVATION - OPPORTUNITY - SUCCESS

## SPORTS ACADEMY

### APPLICATION

Student name: \_\_\_\_\_

Year level: \_\_\_\_\_

Date: \_\_\_\_\_

Application Due Date
All applications will be considered. NOTE: Classes may be full.

Are you are applying for **more than one** Academy?  YES  NO

If **YES** you must complete a separate application for each academy AND number them in **order of preference**:

Sports Academy

Creative Industries Academy

STEM Academy

- **Every student** applying for an academy **must also complete** a Personalised Interest Project (PIP) selection form.
- This application is in addition to your child's school enrolment. Please ensure your child's enrolment has been finalised.

#### Fee: Nil

There may be additional expenses for professional experts and/or longer excursions, of which you will be notified. Sports Academy students are expected to participate in numerous extra-curricular opportunities relevant to the Academy.

---

### Further Student details:

Current School: \_\_\_\_\_

Campus you will be attending: \_\_\_\_\_

Date of Birth: \_\_ / \_\_ / \_\_\_\_

Gender: (please circle)    Male    Female

### Areas of Interest:

List the areas of sport in which you are interested. This may include various sports, interests in coaching, refereeing, fitness, strength, nutrition etc.

---

---

### Why I'd like to be in the Sports Academy:

---

---

---

### Sporting Activities and Achievements:

Please list the sporting activities in which you are or have been involved involved.

Include information such as:

- certificates (participation, achievement)
- awards
- ribbons
- trophies
- teams (year/s and and competitions)
- individual and/or team achievements
- record of representative attainment and/or performance
- relevant qualifications
- other sporting activities or experiences

---

---

---

---

---

---

---

---

---

---

---

### Additional Information:

If you wish the College to consider any additional information, please outline this information below or attach the appropriate supporting data.

---

---

---

### Parent support of their child's application:

Parent/s or Carers need to demonstrate their support of their child in the Creative Industries Academy Program.

YES

NO

### Confirmation:

In submitting this form I declare that the information supplied on this form and in the accompanying documents and statements is complete and correct to the best of my knowledge. If any of the information is found to be false or misleading, I accept that Hastings Secondary College may cancel any offer that might be awarded to me on the basis of this application.

Student name: \_\_\_\_\_ Signature: \_\_\_\_\_

Parent/Carer name: \_\_\_\_\_ Signature: \_\_\_\_\_

### Should you have enquiries please contact:

**Michelle Garven** HT Teaching and Learning  
Hastings Secondary College  
Westport Campus                      6583 6400  
Port Macquarie Campus              6583 1844