

EXCELLENCE - INNOVATION - OPPORTUNITY - SUCCESS

CREATIVE INDUSTRIES ACADEMY

APPLICATION

Student name:			_		
Current Year level:			_		
Date:			_		
Application Due Date					
All applications will be considered.					
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 :					
Creative Industries Academy					
Sports 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: \$50 per Semester which covers specialist consumable items and local excursions.

There may be additional expenses for professional experts and/or longer excursions, of which you will be notified.



Further student details:	
Current School or campus:	
Campus you will be attending:	
Areas of Interest:	
Tick boxes to indicate your subject preferences; you owill NOT affect your application.	can indicate from between 1 and 4 areas. The number indicated
Visual Arts	Music
Dance	Drama
Creative Industries Activities: Please list the dance, Drama, Music and/or Art activiti	es in which you are or have been involved.
Please list the dance, Drama, Music and/or Art activiti Here are some ideas, there may be others (not sure?	include it anyway):
certificates and/or awards (participation, achitrophies and/or medallions	
choirs, bands, orchestras, ensembles and/or of individual or group training	drama groups in which you participate
individual or group tuition	ls for Art Danca Music and Drama
private/out of school tuition, groups or schooindividual and/or group achievements	is for Art. Dance, whose and Drama
record of performance/scompetitions, festivals, galas, eisteddfods or s	similar
 workshops (out of school) 	
 other creative activities or experiences 	



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Additional Information:		
If you wish the College to consider any additiona	al information, please outline this informa	tion below.
Parent support of their child's applicate	tion:	
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Parent/s or Carers need to demonstrate their sup		es Academy Program.
YES	NO	
Confirmation:		
In submitting this form I declare that the informa	tion supplied on this form and in the accor	mpanying documents and
statements is complete and correct to the best of		
misleading, I accept that Hastings Secondary Colle of this application.	ege may cancel any offer that might be aw	varded to me on the basis
	-	
Student name:	Signature:	
Parent/Carer name:	Signature:	
Should you have enquiries please contact:	Michelle Garven College H	
	Hastings Secondary College	
	Westport Campus	6583 6400
	Port Macquarie Campus	6583 1844