HASTINGS SECONDARY COLLEGE EXCELLENCE - INNOVATION - OPPORTUNITY - SUCCESS
SPORTS 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:
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 or campus:

Campus you will be attending: _____

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:

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Parent/s or Carers need	to demonstrate their subbort	or their child in the Crea	ative industries Acader	ny 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 LearningHastings Secondary CollegeWestport Campus6583 6400Port Macquarie Campus6583 1844