

TRINITY BAY STATE HIGH SCHOOL

Talented Athlete Academy

School of Excellence Application APPLICANT INFORMATION: Student's First Name: Student's Surname: Student's Current School: Student's Current Year Level: Gender: Male Female Date of Birth: PARENT/GUARDIAN INFORMATION: Parent/Guardian Name: Parent/Guardian Signature: **Email Address:** Mobile: Mailing Address: I would like to nominate for the following Excellence Program: Tick Academy year level you wish to apply for: Year 7 Academy Year 8 Academy Year 9 Academy Year 10 Academy SPORTING RESUME to be completed by student: Outline your sporting achievements in and out of school. Please provide a personal statement outlining your sporting goals. How will you enhance the sporting reputation of Trinity Bay and why you would make a successful member of the Trinity Bay Rays **Talented Athlete Academy?**



COACH/TRAINER/SPORTS REFERENCE: You must organise <u>two</u> referees to comment on the following. Referees may be contacted regarding your application.											
Referee Name No. 1:						Position/Role:					
Email Address:						Contact Phone No:					
Signature of Referee No.1:											
Please rate by circling the following qualities. Rating scale 1 = Satisfactory → 5 = Outstanding											
Present Skill Level:	1	2	3	4	5	Attitude to Training:	1	2	3	4	5
Sportsmanship:	1	2	3	4	5	Personal Organisational Skills:	1	2	3	4	5
Fitness Level:	1	2	3	4	5	Self-Discipline:	1	2	3	4	5
Additional Comments:											
Defense News No. 2	<u> </u>					Position/Role:					
Referee Name No. 2:						r osition, note:					
Email Address:						Contact Phone No:					
Email Address:	qualities	s. Ra	ting s	cale :	1 =Satisfa	Contact Phone No:					
Email Address: Signature of Referee No.2:	qualities	s. Rat	ting s	cale 1	1 =Satisfa 5	Contact Phone No:	1	2	3	4	5
Email Address: Signature of Referee No.2: Please rate by circling the following						Contact Phone No: ctory → 5 = Outstanding	1	2 2	3	4 4	5
Email Address: Signature of Referee No.2: Please rate by circling the following Present Skill Level:	1	2	3	4	5	Contact Phone No: ctory → 5 = Outstanding Attitude to Training:					
Email Address: Signature of Referee No.2: Please rate by circling the following Present Skill Level: Sportsmanship:	1	2	3	4	5	Contact Phone No: ctory → 5 = Outstanding Attitude to Training: Personal Organisational Skills:	1	2	3	4	5
Email Address: Signature of Referee No.2: Please rate by circling the following Present Skill Level: Sportsmanship: Fitness Level:	1	2	3	4	5	Contact Phone No: ctory → 5 = Outstanding Attitude to Training: Personal Organisational Skills:	1	2	3	4	5
Email Address: Signature of Referee No.2: Please rate by circling the following Present Skill Level: Sportsmanship: Fitness Level:	1	2	3	4	5	Contact Phone No: ctory → 5 = Outstanding Attitude to Training: Personal Organisational Skills:	1	2	3	4	5
Email Address: Signature of Referee No.2: Please rate by circling the following Present Skill Level: Sportsmanship: Fitness Level:	1	2	3	4	5	Contact Phone No: ctory → 5 = Outstanding Attitude to Training: Personal Organisational Skills:	1	2	3	4	5
Email Address: Signature of Referee No.2: Please rate by circling the following Present Skill Level: Sportsmanship: Fitness Level:	1	2	3	4	5	Contact Phone No: ctory → 5 = Outstanding Attitude to Training: Personal Organisational Skills:	1	2	3	4	5
Email Address: Signature of Referee No.2: Please rate by circling the following Present Skill Level: Sportsmanship: Fitness Level:	1	2	3	4	5	Contact Phone No: ctory → 5 = Outstanding Attitude to Training: Personal Organisational Skills:	1	2	3	4	5

TO FINALISE YOUR SCHOOL OF EXCELLENCE APPLICATION:

- 1. Please attach a copy of your most recent academic report card to this application
- 2. Any other supporting evidence/documentation
- 3. Complete your Enrolment Application
- 4. **EMAIL** completed School of Excellence Application form, TBSHS enrolment application and report cards to TACSOE@trinitybayshs.eq.edu.au with subject line: Talented Athlete Academy or

DELIVER to Trinity Bay State High School, Enrolment Officer, Attention: Talented Athlete Academy or

POST to Trinity Bay State High School, Enrolment Officer, Attention: Talented Athlete Academy PO BOX 5071, CAIRNS QLD 4870.

Please note that the 1st round closing date for submitting your School of Excellence Application is midday Tuesday week 10 (last Tuesday of Term 1).

After physical trials are held, successful candidates will receive an acceptance letter to the program.

THE TALENTED ATHLETE ACADEMY

for elite and like-minded athletes

OFFICE USE ONLY: Application Received: ____ / ____/ _____



Athlete