

North Vancouver School District Peak Performance Program Student Application

Year: _____

PERSONAL INFORMATION:

Student Name: _____

Parent(s) Name: _____

Address:

Street

Email

City

Home Phone

Postal Code

Cell Phone

Current Age & Grade: _____ Report Card Avg: _____

PROFILE:

Area of Focus (e.g., Athletics, Dance, Music): _____

Area of Specialty (e.g., Gymnastics, Ballet, Violin): _____

Club/Team/Organization: _____

Coach/Instructor: _____ Telephone: _____

Reason for applying to the Peak Performance Program:

Describe your training program including hours per week practicing and competing:

Outline your long-term goals in your area of speciality:

List your involvement in activities outside your area of specialty – include school and community clubs, teams, etc.:

Attachments:

- Copy of most recent Report Card
- Copy of Training and Competition Schedule signed by Coach/Instructor
- Bio of athletic or artistic accomplishments detailing past performances and competitions, awards, standings, and provincial or national rankings.
- Coach/Instructor Verification Form

OFFICE USE ONLY:

Counsellor Approval: _____
Principal Approval: _____

Date: _____
Date: _____

North Vancouver School District Peak Performance Program Coach/Instructor Verification Form

Student Name: _____

Area of Training: _____

Club/Organization/Program: _____

Coach/Instructor Name: _____

Coach/Instructor Address:

Street

Website

City

Email

Postal Code

Business Phone

Will this student benefit from being enrolled in the Peak Performance Program and why?

Please describe the student's current level of ability:

Is this student attending practices / competitions on a consistent basis?

Please describe the student's program including number of hours per week in training, competition and related activities:

Coach's Signature: _____