Sporting Pathway Program Application Form

Application Form

Student's Details:

Surname:	First Name:		Middle Name:				
Gender:	Current Age:		Date of Birth:				
Parent/Guardian Details:							
Mother/Guardian:		Father	/Guardian:				
Primary Family Home Add	ress:						
Street Number and Name:	treet Number and Name:						
Suburb:	Post Code:						
Contact Number: H:	umber: H: W: M:						
Email Address:							
Sport of Interest (please rar	nk your top 3 choices	s - 1 is first	preference)				
Basketball	🗌 Netball		Australian Rules Football				
Tennis	Cricket		Swimming				
Other (please print):	Athletics		Non Sporting Athlete				
Please note: Sports will only be offer	ed if there is enough stude	nt interest					
		•	ailable for all families which includes a four ol fees must be paid before a student can take				
		5					

What a student/family receives for their Sporting Pathway Program payment:

- 40 week specialised program
- Specialised coaching sessions in their chosen sport conducted by qualified coaches with accreditation and working with children's checks. Warrnambool College staff will also be present at all training sessions.
- Two periods per week of strength and conditioning sessions programs will be supported and guided by Federation University (Ballarat) and implemented by qualified strength and conditioning coaches in the High Performance Centre with the latest sporting equipment including spin bikes, heart rate monitors and weights room.
- Cardio Enhancement sessions conducted and supervised by qualified instructors from Defy Fitness Warrnambool; qualified Strength and Conditioning Warrnambool College staff will be in attendance at all sessions.
- Two trips to Federation University to conduct pre and post testing under the supervision of qualified Exercise and Sport Science professionals/lecturers.
- Access to a qualified Sport Physiotherapist assessment and advice given to injured athletes
- Access to online wellness Training Peaks program

It must be noted that the SPP uniform is ordered online and is separate to the \$900 payment.

Sporting Coach Referral Form

Full Name of Student:				
Name of Coach:	Position Held:			
Contact No.:	Present Club/Training Venue:			
Students position in your team (if a	pplicable):			
Student's Sporting Strengths:				
Student's Sporting Weaknesses:				
Student's training commitment and	l coachability:			
Attitude / Sportsmanship:				
Sporting Cosch's Cinestower				
Sporting Coach's Signature:	Date:			

Student Referral Form

Sporting goals

Briefly describe your future goals in your sport. Please include goals for 2020 plus longer term goals.

Academic goals

Briefly describe your learning goals, including subjects for improvement and future academic studies.

Achievements

List the achievements that make you feel most proud. These may be positions of responsibility you have held or awards you have earned, etc.

Parent and Student signatures Please ensure all details are correct to the best of your knowledge and sign in the space below.

Student's Signature: _____ Parent's Signature: _____ Date:

Confidential Teacher Referral Form

(To be completed by the student's current year level teacher)

Behaviours	Very High	High	Medium	Low	Very Low
Demonstrates persistence towards learning in the classroom					
Supports peers with their learning					
Demonstrates mutual respect towards other teachers and students in the yard (during recess and lunch)					
Actively works on weaknesses in their learning					
Welcomes feedback as an opportunity to learn					
Demonstrates resilience when confronted with challenging learning in the classroom					
Is a leader and accepts responsibility					
Applies learning to real world situations					
Willingly extends their own learning					
Is friendly, has the ability to mix well with peers and displays sensitivity to the feelings of others					
Is a leader and accepts responsibility					
Selects a range of ways to communicate with their teachers and peers					

Please list additional information that highlights the student's effort and attitude toward learning (in and out of the classroom), which may be relevant in determining this child's suitability for the sporting pathway program.

Please note that in order to remain in the program, students must be able to consistently demonstrate a high level of effort and positive attitude toward their learning across all subjects.

Teacher's Signature: —

_____ Date: _____

This form should be completed and returned before Monday August 19th 2019 to:

Adam Matheson Warrnambool College Grafton Road Warrnambool 3280