



**COAST 2016 APPLICATION**

Due by 3:00pm December 18<sup>th</sup>, 2015 in Room 104

***Grade 9 students who wish to apply for COAST complete the application form and write a supporting letter.***

***Applicants will be interviewed.***

Personal Information

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Student Number: \_\_\_\_\_

Student Email: \_\_\_\_\_

Parent Guardian Information

Please provide contact details for ONE parent or guardian:

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Email: \_\_\_\_\_

Home Address # and Street: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

COAST CANDIDATES

Successful COAST candidates show leadership potential, are open to challenging themselves and are organized with their academic and co-curricular involvement.

Application Criteria:

- Demonstrated positive attitude
- Commitment to cooperation and respecting others
- Level of motivation and initiative taking
- Reasonable time management and organizational skills
- In good standing in co-curricular involvement

EXPERIENCE

Please list any relevant experiences you have that would contribute to your success in this program. This includes; games, clubs (past or present), school trips, community programs, summer camps and family outings.

Example:

*Fall 2014 - Hiking - 3 days – Outdoor Club Hiking Trip to Garibaldi Lake*

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CERTIFICATE AND AWARDS

Please list any outdoor certifications (swimming, first aid, canoeing, sailing, etc) or awards that you have earned and when you earned them:

Award or Certification:

Date:

_____	_____
_____	_____
_____	_____

APPLICATION LETTER (Please attach with this application)

As part of your application package, you are required to submit a letter (addressed to “COAST 2016 Selection Committee”) indicating:

- a) Why you would like to be a part of COAST
- b) How you feel you will benefit being a part of the program
- c) What you will be able to contribute to the program (ex: skills and character attributes)
- d) A description of a challenge that you have overcome, and what you learned from the experience

ACADEMIC REFERENCES

Applicants do not have to be “A” students, but do have to be passing and demonstrating a willingness to work hard and complete assignments on time. Please get the signature from 2 teachers who we could talk to and would verify that you are a good candidate for COAST.

Teacher Name \_\_\_\_\_

Teacher Name \_\_\_\_\_

Teacher Signature \_\_\_\_\_

Teacher Signature \_\_\_\_\_

ACKNOWLEDGEMENT OF CONDITIONS

Please read each of the items below and check that you understand each:

- I understand that there is an additional fee associated with participating in the COAST program
- I understand that if I am accepted and choose to accept the placement in the program, I am committing to full participation in COAST activities for the semester.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

PARENT PERMISSION

I support my son/daughter’s application for the COAST Program \_\_\_\_\_

Parent Signature

**This Application must be given to Ms. Smith or Ms. Bogen in Room 104 by December 18<sup>th</sup>, 2015**