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**George S. Henry Academy**

**SHSM PROGRAM APPLICATION**

George S. Henry Academy has three different SHSM programs.

1. Environment
2. Health and Wellness
3. Hospitality and Tourism

Please fill out and submit this application to Mr. Mindenhall if you would like to apply to one of our programs.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Personal Information | | | | |
| Last Name | | Given Name | | |
| Home Phone Number | Date of Birth (DD/MM/YYYY) | | | Gender |
| Current School | | | | |
| SHSM Program you would like to apply for:  Environment Health & Wellness Hospitality & Tourism | | | Grade | |
| Complete the following sections below. If you run out of space, please attach additional pages. | | | | |
| 1. What is your career goal, and why are you interested in our SHSM program? | | | | |
| 1. What skills and abilities do you have that will help you succeed in our SHSM program? | | | | |

Once you have submitted your application, you will be contacted for an interview.

SHSM

**Teacher Reference Form 1**

1. COLLECTION OF PERSONAL INFORMATION: Personal information is collected under the authority of s. 265(1)d of the Municipal Freedom of Information and Protection of Privacy Act. The information collected on this application will be used for the purposes of assessing and determining suitable candidates for the George S. Henry Health and Wellness SHSM program.

Name of Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Teacher Name (printed): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| --- | --- | --- | --- |
| Excellent | Good | Satisfactory | Needs  Improvement |

**QUALITIES:**

Punctuality

Communication

Ability to Learn

Leadership

Work Ethic

Honest/Trustworthy

General Conduct

**COMMENTS:** (please write any comments that you feel would help in assessing this student)

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Teacher’s Signature