



STEM

George S. Henry Academy

APPLICATION

2022-23 Application: To be completed by the grade 8/9 student candidate and their parent/guardian.

A+ STEM Program

The A+ STEM program is a grade 9/10 program that has been designed to provide students that are interested in Science, Technology, Engineering, and Mathematics with a variety of experiences in the STEM fields including career exploration, guest speakers and more. This interest-based program will also provide students with opportunities to participate in a variety of out-of-school experiences, helping them to prepare for post-secondary education.

The Selection Process

A+ STEM program candidates must submit the following to be considered for our program:

- Application form with Teacher Reference
- Out of Area Attendance Form (if G.S.H.A. is not your home school)

Please submit your application package to the Student Services office by

January 2024 Deadline

(Out of Area Attendance Deadline)

Personal Information

Last Name		Given Name	
Home Address/Apartment Number			
City	Province	Postal Code	
Home Phone Number	Date of Birth (DD/MM/YYYY)	Gender	
Parent/Guardian Name		Parent/Guardian Daytime Contact Number	

Current School

Current School	Grade
Check all that apply: <input type="checkbox"/> Special Education <input type="checkbox"/> ESL <input type="checkbox"/> Gifted	

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 A+ STEM program?

2) What skills and abilities do you have that will help you succeed in our A+ STEM program?

A+ STEM PROGRAM

Teacher Reference Form

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): _____

QUALITIES:

	Excellent	Good	Satisfactory	Needs Improvement
Punctuality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to Learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work Ethic	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Honest/Trustworthy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General Conduct	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



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

Teacher's Signature