



• AVON VIEW HIGH SCHOOL •
OPTIONS & OPPORTUNITIES
 STUDENT APPLICATION FORM



Name:		Student Number:
Date of Birth:	Age:	Parent/Guardian Name:
Home Phone:	Student Cell #:	Student Email:
		Parent Email:
Home Address:		Mailing Address:
Community Reference:		

Options & Opportunities Program – Application Form Questions

Section #1: To Be Completed By The Student

Why are you interested in applying to the O₂ program?

What issues or obstacles are creating difficulties for you in the present school setting? What issues or obstacles may be creating difficulties for you outside of school?

What subjects in school appeal to you most? Why?

What subjects are you most successful in?

What subjects in school do you not enjoy? Why?

What subjects in school do you find difficult? Why?

How would you describe the effort that you put into your school work? *Place a check mark inside the box that best describes your efforts.*

- I always give my best effort. I only give my best effort on certain occasions I rarely give a good effort to my courses.

Describe a situation where you really tried to do your best.

Make a general statement about your learning style.

Place a check mark beside all responses that describe how you learn well.

- | | |
|--|---|
| <input type="checkbox"/> Reading | <input type="checkbox"/> Listening |
| <input type="checkbox"/> Practicing and performing | <input type="checkbox"/> Observing (watching) |
| <input type="checkbox"/> Memorizing | <input type="checkbox"/> Creating |
| <input type="checkbox"/> Interacting (hands on) | <input type="checkbox"/> Using technology |
| <input type="checkbox"/> Experiencing (work placement) | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Working in teams | <input type="checkbox"/> Working alone |

Have you repeated any grades in school? Yes No

If yes, which grade(s)? _____

What are your hobbies and interests outside of school?

What extra-curricular activities are you involved in or wish to become involved in?

How do you spend your free time?

Are you a responsible person? Yes No

Explain: _____

Are you a punctual person? Yes No

Explain: _____

What are your educational goals & long-term career goals?

Are you presently working part-time? Yes No

If so, where? _____

Are you willing to make a commitment to keeping excellent attendance, working hard, and following O₂ program expectations? This includes participation in *all* components of the program including academics, school trips, work placements, and other related activities.

Yes

No

Section #2: To Be Completed By Parent/Guardian(s)

What are your goals for your child?

How do you think this program can better meet your child's learning needs and help improve his/her school achievements?

What are your expectations of this program?

The O₂ program requires the involvement of families, students, school, and community working in partnership so that students graduate and continue to further their education or follow employment opportunities. This will include a community-based learning component. The school will require your full support for your student to achieve program goals. How do you see yourself in a supporting role for your student?

The process for admission to the Options and Opportunities Program:

1. Student and parents/guardians complete the application.
2. Student and parents/guardians attend all interview/planning sessions.
3. Letter of acceptance and Student Learning Assessment and Evaluation Plan to be sent.
4. Student and parents/guardians attend all necessary meetings during the school year.

Student Signature

Date

Parent/Guardian Signature

Date