



# 2020 ATHLETIC DEVELOPMENT PROGRAM

## TEACHER REFERENCE and SCHOOL REPORT

Dear School Teacher,

The student listed below has applied for entry into the GC Athletic Development Program.

The ADP maintains a holistic approach to the development of our student athletes. This involves an academic and community emphasis as well as sporting development.

For this reason we request (with parental/guardian consent) that the following details be completed and returned with the student's application.

**Student's Name:** \_\_\_\_\_

**School:** \_\_\_\_\_ **Year Level:** \_\_\_\_\_

**Academic Ability:** Below Average / Average / Above Average / Well Above Average

**Comments** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Attitude regarding school work and in general

\_\_\_\_\_  
\_\_\_\_\_

Relationship with staff and peers

\_\_\_\_\_  
\_\_\_\_\_

**Signature:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Date:** \_\_\_/\_\_\_/\_\_\_

**Please include a copy of your Semester 1 & 2 2018 and Semester 1 2019 School Report at the end of this application.** Attached  YES  NO