All applicants must arrange for and complete an interview. Students must be part of SD71 to participate in Explore. <u>Please print clearly!</u> Your application is due **March 11 either electronically or at the Vanier/Isfeld/Highland school office.

NAME:	STUDENT NUMBER:
PHONE NUMBER:	ADDRESS:
SCHOOL CURRENTLY ATTENDING:	DATE OF BIRTH:
PARENTS/GUARDIANS:	
MEDICAL CONCERNS:	
SD71 E-MAIL:	
ACADEMIC HISTORY:	
GR. 10 COURSES (Teacher)	IN PROGRESS/COMPLETED MARK
involved in and help coordinate fundrai	OLVEMENT: ORE to run successfully parents will be expected to be ising activities. The course fee is \$850.00** and will be
I,, grant pern EXPLORE PROGRAM.	mission for my son/daughter to apply for entrance into the
SIGNED Please Print Name	Signature

PERSONAL STATEMENT:

1. EXPLAIN WHY YOU WOULD LIKE TO BE INVOLVED IN THE EXPLORE PROGRAM.
2. WHAT SKILLS, ABILITIES AND ATTRIBUTES DO YOU POSSESS THAT MAKE YOU A GOOD CANDIDATE FOR EXPLORE?
REFERENCES: (REFEREES PLEASE WRITE DIRECTLY ONTO THIS FORM.) TEACHER:
COMMUNITY MEMBER: