

**ACADEMIC EXCELLENCE PROGRAM
APPLICATION 2024
(NOT TO BE USED FOR YEAR 6 STUDENTS)**

NAME: _____ DATE: _____

D.O.B: ____ / ____ / ____ MALE / FEMALE: _____

CURRENT YEAR LEVEL: _____ CURRENT SCHOOL: _____

CURRENT SIBLING ATTENDING SOUTHPORT SHS: _____

PARENT/GUARDIAN NAME: _____

ADDRESS: _____

EMAIL: _____ @ _____

PHONE: _____ MOBILE: _____

1. SCHOOL ACADEMIC ACHIEVEMENTS: (Academic Competitions results, academic awards etc.)

2. ACADEMIC ACHIEVEMENTS OUTSIDE OF SCHOOL: (Involvement in gifted and talented programs, young scholars, science competitions etc.)

3. FUTURE ASPIRATIONS IN THE ACADEMIC FIELD:

4. HOW DO YOU BELIEVE THE ACADEMIC EXCELLENCE PROGRAM WOULD ASSIST YOUR ACADEMIC GROWTH?

THE ACADEMIC EXCELLENCE PROGRAM CHECKLIST:

- ☐ I have completed all sections of attached application form.
- ☐ I have included all supporting documentation in relation to my academic achievements.
- ☐ I have included copies of my last two school reports.
- ☐ I have included my Year 5/7/9 NAPLAN results (most recent).
- ☐ I understand that it is a requirement of the program that I display appropriate behavior and attitude across all areas of learning and am aware that should my behavior be less than exemplary I may be at risk of losing my excellence position.
- ☐ I understand the decision with regard to the awarding of entry into a program of excellence, scholarships and ongoing participation in the program will be at the discretion of the Principal.
- ☐ I have read the [Excellence Programs Parent Information booklet](#) and understand the requirements for audition / interview / trial / exam associated with the program.

STUDENT'S SIGNATURE: _____

PARENT'S SIGNATURE: _____ DATE: ____ / ____ / ____

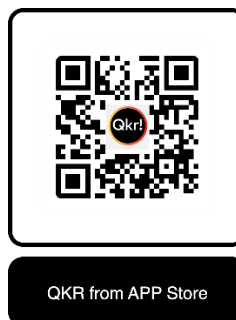
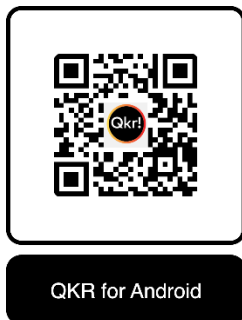
APPLICATION FEE (for Non-Catchment Applications only with no sibling currently attending):

A once only, non- refundable \$50 administration fee must be paid upon application to any Excellence Programs for any students who currently reside **outside** of the Southport State High School catchment area (and do not currently have a sibling attending). Please note, this fee is **payable only once**, even if submitting multiple Excellence Programs applications.

Please refer to our school website for a current map of the catchment area:

<https://southportshs.eq.edu.au/enrolments/catchment-area>

Paying by Qkr*: (preferred method of payment) *please see further instructions on our website.



Bank Transfer:

Bank: Commonwealth Bank of Australia

Account Name: Southport SHS General A/C

BSB: 064-430

Account Number: 00090200

Reference: **CATCH (student name)**

Alternatively, payment can be made at the school office Monday – Wednesday, 8am – 12.30pm only.