Olds High School	Date:
New Student and Transfer Student Applica	
Name:	
Addrass	
Address:	
Phone:	
Student Email:	
Parent Email:	
Present School:	
Present Grade:	
Courses Completed this school year (include	grade F-final or M-midterm)
Course	Mark
Course	Mark
	+
*You must include your most recent report ca	ard with your application form.
People you worked with at your school (co	ounsellor, resource room teacher teaching assistant)
Teople you worked with at your school (e.	ounsellor, resource room teacher teaching assistant,
Family Background	
Tuniny buckground	
Living Situation (one or both parents, gran	ndparents, guardian):
If you are an independent student, what is	your living arrangement?
Siblings:	

(over)

Extracurricular activities: (state your experience/interest in each area)
Sports:
Fine Arts (music/drama/art):
Leadership/Student Council:
Clubs:
Part-time employment
Are you presently working, if so where and how many hours/week?
State in written form why you are requesting to attend Olds High School (be specific).
If we asked your present teachers list 5 words they would use to describe you.
References (present school teacher and administrator/counsellor)
Teacher Name:
Email:
Administrator/Counsellor:
Email:
School Phone Number:

**Administration/Counsellor Notes**