



**ARTS HURON PROGRAM APPLICATION
2010**

"We seek the summit of creation as committed companions who believe that we can only lead by learning to follow; that we can only be passionate by first learning compassion; that we can only reach the destination by valuing the journey. We rise beyond the gifts we alone possess, and reach for the heights that we can only achieve together."

APPLICANT'S NAME: _____	ENTERING GRADE: _____
PRESENTLY ATTENDING (School Name): _____	GRADE: _____
THIS APPLICATION IS FOR: _____	OTHER APPLICATION: _____
ATTACHMENTS:	
<input type="checkbox"/> AUDITION FEE	<input type="checkbox"/> REPORT CARD
<input type="checkbox"/> PROOF OF RESIDENCY	<input type="checkbox"/> PHOTOGRAPH
<input type="checkbox"/> STUDENT QUESTIONNAIRE	<input type="checkbox"/> PARENT QUESTIONNAIRE
<input type="checkbox"/> ACADEMIC REFERENCE	<input type="checkbox"/> ARTS REFERENCE

Application Due Date: 4:00 p.m., December 18, 2009

APPLICATION INFORMATION (please read carefully):

- Students may apply to the following disciplines:
DANCE DRAMA VISUAL ARTS MUSIC (Vocal, or Instrumental)
- Applications received in the Huron Heights main office by 4:00 p.m., December 18, 2009, are guaranteed an audition.
- Late applications will be held in order of the date and time received.
- Late applicants are not guaranteed an audition; an audition will be scheduled only if time permits.
- A maximum of two auditions is available to each student.
- A separate application form is required for each discipline.
- Students and their parent(s) and/or guardian **MUST** reside in York Region (no exceptions).
- A separate (non-refundable) **audition fee of \$20.00** must accompany **each** application.
- Due to the large number of auditions being arranged, we may be unable to change assigned times. **Auditions** will be held January 25-28, 2010.

ATTACHMENTS REQUIRED (please attach to top left-hand corner of this page):

- Audition Fee: A separate cheque for \$20.00 (made out to ARTS Huron, with the student's name written clearly on the front) must be attached to each application.
- Student Questionnaire: Please attach a separate sheet with your answers.
- Parent Questionnaire: Please attach a separate sheet with your answers.
- Academic Teacher Reference: Download and enclose completed form in a sealed envelope.
- Arts Teacher Reference: Download and enclose completed form in a sealed envelope.
- Report Card: Please attach a photocopy of your November/December 2009 Report Card. If for some reason the report is not available prior to the due date, the report must be received by the ARTS Huron office **NO LATER THAN JANUARY 8, 2010** (Fax # 905-895-8912).
- Proof of Residency: Please attach a photocopy of ONE of the following: Property Tax Bill, Current Lease or Deed, Agreement to Purchase, or Rental/Lease Agreement.
- Student Photograph: Please attach (where indicated) a recent "head and shoulders" photograph. A school photo is acceptable.

ARTS Huron Open House

An Open House will be held on **Saturday, November 28, 2009**, at Huron Heights Secondary School, 40 Huron Heights Drive in Newmarket. Please come to the Auditorium at **1:30 p.m.** A performance followed by a town hall format question and answer session will be followed by breakout sessions with program leaders. This session is primarily for students accompanied by parents/guardians.

MAIL OR DELIVER APPLICATIONS TO:

ARTS Huron Heights, MAIN OFFICE
Huron Heights Secondary School
40 Huron Heights Drive,
Newmarket, L3Y 3J9
Telephone: 905 895-2384

(please do NOT e-mail applications)

Please attach a
head and
shoulders
photograph
in this space

PERSONAL DATA (please fill in):

THIS APPLICATION IS FOR (circle ONE discipline):

dance drama visual arts music: __ vocal __ instrumental (insert type): _____

I HAVE ALSO SUBMITTED A SEPARATE APPLICATION FOR (if applicable, circle discipline):

dance drama visual arts music: __ vocal __ instrumental (insert type): _____

Student ID #

GENDER

LAST NAME

FIRST NAME

STREET ADDRESS (include apt/unit #)

TOWN/POSTAL CODE

HOME TELEPHONE

DATE OF BIRTH (DD/MM/YY)

PARENT/GUARDIAN E-mail address (print clearly):

MOTHER'S/GUARDIAN'S NAME

HOME TELEPHONE

BUSINESS TELEPHONE

FATHER'S/GUARDIAN'S NAME

HOME TELEPHONE

BUSINESS TELEPHONE

PRESENT SCHOOL

Grade

YRDSB HOME AREA HIGH SCHOOL

REFERENCES: (Your references should be the people who are familiar with your work in both the arts and academics. You may attach reference letters if you wish.)

ARTS REFERENCE

Name

Organization

Title

Telephone

ACADEMIC REFERENCE

Name

Organization

Title

Telephone

QUESTIONNAIRE (Please attach a separate sheet with your answers):

1. Why do you wish to enroll in the Arts Huron Program?
2. Have you ever taken, or are you taking private, individual, or group lessons? Please give details. Dancers, please specify the type of dance.
3. List any other activities (other than lessons) in which you are currently involved.
4. Have you ever performed or exhibited your work? Please give details.

PARENT STATEMENT

Please tell us why you are interested in having your child attend the ARTS Huron program? Include comments on particular academic and artistic goals that you would like to have your son/daughter accomplish while attending ARTS Huron Heights. *Limit your response to 100 words.*

I have read and understood the information regarding the application and audition process. I understand that all application materials become the property of Huron Heights Secondary School and that any part of an audition may be audio or video taped. **I understand the decision of the audition committee is final.**

PARENT(S)/GUARDIAN SIGNATURE

STUDENT SIGNATURE

Note: As per Board policy, ARTS Huron Heights is an optional program and as such students are NOT entitled to Board provided transportation. An annual program fee, currently set at \$100, is payable upon acceptance to the ARTS Huron Heights Program.

Notice to Parents/Guardians and Students

Information is collected pursuant to the *Education Act*. Information is used to verify mailing address and proof of residency. If you have any questions regarding the collection of this information please contact the principal in writing.

ACADEMIC TEACHER REFERENCE

Student Name: _____ OEN: _____

Please fill out the form below, seal it, sign the seal and place it in envelope addressed to the ARTS HURON Admissions Committee.

Student's Name: _____

Reference's Name: _____ Signature: _____

Role in which you know the student: _____

Contact Number: _____ Contact email: _____

How long have you known the student?: _____

Please rate the student according to the following criteria as realistically as possible. Check the appropriate box for each of the areas listed below:

	OUTSTANDING (Top 5%)	GOOD (Top 25%)	AVERAGE	BELOW AVERAGE	UNSURE
Academic Results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Academic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teamwork	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates respect for self, others and school community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepts Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain how this student will perform in a demanding, self-directed program? Do you have any concerns?

Briefly, describe evidence that demonstrates the student's passion for the arts.

Do you have any additional information you would like to add pertaining to the student's application?

Share and briefly explain with examples, three attributes that characterize this individual.

**Thank you for your time and consideration of this student.
The Admissions Committee
ARTS HURON AT HURON HEIGHTS SECONDARY SCHOOL**

ARTS TEACHER REFERENCE

Student Name: _____ OEN: _____

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Reference's Name: _____ **Signature:** _____

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How long have you known the student?: _____

Please rate the student according to the following criteria as realistically as possible. Check the appropriate box for each of the areas listed below:

	OUTSTANDING (Top 5%)	GOOD (Top 25%)	AVERAGE	BELOW AVERAGE	UNSURE
Artistic Ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Artistic Potential	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Personal initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates respect for self and others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leadership ability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Works Independently	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accepts Responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Time Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Interaction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain how this student will perform in a demanding, self-directed program? Do you have any concerns?

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Do you have any additional information you would like to add pertaining to the student's application?

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The Admissions Committee
ARTS HURON AT HURON HEIGHTS SECONDARY SCHOOL**