

# STUDENT APPLICATION FORM

Please provide the following information using BLOCK LETTERS

## APPLICANT INFORMATION

|                 |             |                               |                                 |
|-----------------|-------------|-------------------------------|---------------------------------|
| Surname         |             | _____                         |                                 |
| First Name      | Middle Name | _____                         |                                 |
| Mailing Address |             |                               |                                 |
| City            |             | Phone (    )                  |                                 |
| Province        |             | Cell (    )                   |                                 |
| Postal Code     |             | Email                         |                                 |
| Date of Birth   | MM          | DD                            | YYYY                            |
|                 |             | <input type="checkbox"/> Male | <input type="checkbox"/> Female |
| Marital Status  |             | Citizenship                   |                                 |

## EMERGENCY CONTACT INFORMATION

(while attending school)

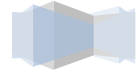
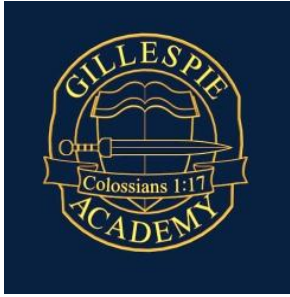
|                       |              |
|-----------------------|--------------|
| Name                  | Phone (    ) |
| _____                 |              |
| Relation to Applicant |              |
| _____                 |              |

## EDUCATIONAL HISTORY

Date of High School completion (i.e. date expected or past)

\_\_\_\_\_

| High School Attended / Home school Program | Date Completed |
|--|----------------|
| _____                                      | _____          |
| _____                                      | _____          |
| _____                                      | _____          |



# PASTORAL REFERENCE FORM

Please provide the following information using BLOCK LETTERS

## PART 1: TO BE COMPLETED BY THE APPLICANT

SUPPLY A PRE-ADDRESSED, STAMPED ENVELOPE TO YOUR REFEREE.

Surname

First Name

Middle Name

Mailing Address

City

Phone ( )

Province

Cell ( )

Postal Code

Email

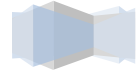
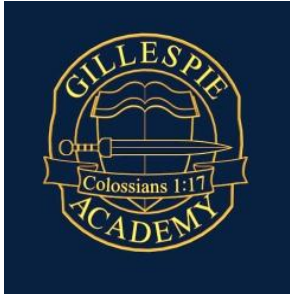
Relation of Person Providing Reference to the Applicant (Pastor, Elder)

### APPLICANT'S WAIVER OF RIGHTS TO ACCESS TO CONFIDENTIAL CONTENT:

I hereby voluntarily waive my rights of access to any information that is contained in the Reference Form (including attachments) and agree that the form shall remain confidential.

\_\_\_\_\_  
APPLICANTS SIGNATURE

After completing the required information above, please give these forms to the person you have chosen to provide a pastoral reference for you. When he has finished completing their part, they are requested to place the papers in a sealed envelope and to sign their name across the seal, then to send it in the mail to the school. THE FORM SHOULD NOT BE RETURNED TO YOU.



# PASTORAL REFERENCE FORM

Please provide the following information using BLOCK LETTERS

## PART 2: TO BE COMPLETED BY THE PERSON PROVIDING REFERENCE

SUPPLY A PRE-ADDRESSED, STAMPED ENVELOPE TO YOUR REFEREE

Surname

First Name

Mailing Address

City

Phone ( )

Province

Cell ( )

Postal Code

Email

Relation of Person Providing Reference to the Applicant (Pastor, Elder)

Church Affiliation

Due to the nature of your comments, please take the time to complete this form carefully and thoroughly. All records are held in strict confidence and we ask you to be frank and objective in your assessment of the applicant's strengths and weaknesses.

When finished, please place it in a sealed envelope, sign your name across the seal and mail it to:

**Gillespie Academy, 50 Finkle Street, Woodstock, ON N4S 3C8  
or email to admin@gillespieacademy.ca**

How long have you known the Applicant?

In what context have you known the Applicant?

How well do you know the Applicant?  Casually  Well  Very Well  Other (please explain)

To be best of your knowledge, does the applicant confess to have a personal relationship with Jesus Christ?

Yes  No  I Don't Know (please explain)

Please tick the best answers (in your opinion) to the following in relation to the applicant's growing character and walk with Christ. Write a short explanation in the space provided.

|   | Not<br>observed          | Weak                     | Fair                     | Good                     | Outstanding              |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Love for Scripture                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Desire for Fellowship /<br>Accountability | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Consistency in Spiritual Growth           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Humility                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Self-Control                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Teachable Spirit                          | <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"/> |
| Responsibility                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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Please describe the applicant's involvement in Church activities.

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Please comment on the applicant's ability to handle stressful situations.

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Describe the applicant's social maturity and consideration for others.

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Based upon my assessment of the applicant's walk with Christ, I would

- Highly Recommend    Recommend    Recommend with Reservation    Not Recommend

that the applicant pursue studies at Gillespie Academy (please explain).

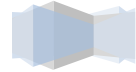
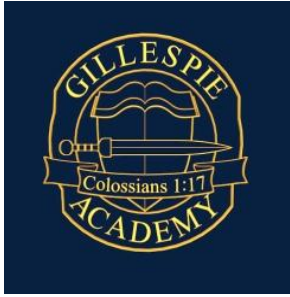
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Signature \_\_\_\_\_ Date \_\_\_\_\_



# ACADEMIC REFERENCE FORM

Please provide the following information using BLOCK LETTERS

## PART 1: TO BE COMPLETED BY THE APPLICANT

SUPPLY A PRE-ADDRESSED, STAMPED ENVELOPE TO YOUR REFEREE.

Surname \_\_\_\_\_

First Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_

Phone (     ) \_\_\_\_\_

Province \_\_\_\_\_

Cell (     ) \_\_\_\_\_

Postal Code \_\_\_\_\_

Email \_\_\_\_\_

Relation of Person Providing Reference to the Applicant (Teacher, Principal) \_\_\_\_\_

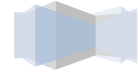
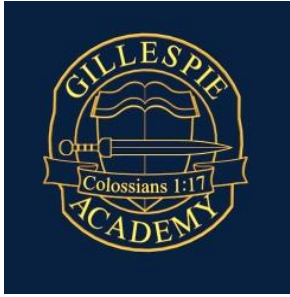
Church Affiliation \_\_\_\_\_

### APPLICANT'S WAIVER OF RIGHTS TO ACCESS TO CONFIDENTIAL CONTENT:

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\_\_\_\_\_  
APPLICANTS SIGNATURE

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# ACADEMIC REFERENCE FORM

Please provide the following information using BLOCK LETTERS

## PART 2: TO BE COMPLETED BY THE PERSON PROVIDING REFERENCE

SUPPLY A PRE-ADDRESSED, STAMPED ENVELOPE TO YOUR REFEREE

Surname

First Name

Mailing Address

City

Phone ( )

Province

Cell ( )

Postal Code

Email

Relation of Person Providing Reference to the Applicant (Teacher, Principal)

Church Affiliation

Due to the nature of your comments, please take the time to complete this form carefully and thoroughly. All records are held in strict confidence and we ask you to be frank and objective in your assessment of the applicant's strengths and weaknesses.

When finished, please place it in a sealed envelope,  
sign your name across the seal and mail it to:  
**Gillespie Academy, 50 Finkle Street, Woodstock, ON N4S 3C8**  
or email to [admin@gillespieacademy.ca](mailto:admin@gillespieacademy.ca)

How long have you known the Applicant?

In what context have you known the Applicant?

How well do you know the Applicant?  Casually  Well  Very Well  Other (please explain)

Please tick the best answers (in your opinion) to the following in relation to the applicant in an academic setting compared to their peer group. Write a short explanation in the space provided

|                                       | Not<br>observed          | Weak                     | Fair                     | Good                     | Outstanding              |
|---------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Intellectual Curiosity                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Response to Criticism                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Self-Direction                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Persistence to Task /<br>Perseverance | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Respect / Kindness for Others         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Academic Honesty                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Social / 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"/> |

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Please tick the best answers (in your opinion) to the following in relation to the applicant's level of academic skill/competency compared to their peer group. Write a short explanation in the space provided

|                           | Not<br>observed          | Weak                     | Fair                     | Good                     | Outstanding              |
|---------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Oral Expression           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Written Expression        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Critical Thinking         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Logical Analysis          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Recognition of Key Themes | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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Please highlight the applicant's specific academic strengths/abilities.

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Please comment on specific areas for potential academic growth.

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Please comment on the applicant's ability to handle academically challenging situations.

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Based upon my assessment of the applicant's walk with Christ, I would

- Highly Recommend    Recommend    Recommend with Reservation    Not Recommend

that the applicant pursue studies at Gillespie Academy (please explain).

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Signature \_\_\_\_\_ Date \_\_\_\_\_