

## Spectrum Community School Athletic Leadership 10 Application 2024/25

Complete the application and return it to Spectrum Community School with the course selection form.

Applicant Information:			
Name	2:		
Parent/Guardian Name(s):			
Email	we can use to contact you: (Pl	LEASE PRINT CLEARLY	0
Home Phone:		Cell Phone:	
	ent School:		
1. 2. 3.	ne Application for Athletic Lead Reason for applying to the pr Any athletic or volunteer ach application. If reapplying sho Copy of last report card. At least two references conta	ogram if new to Athletic ievements that should b owing a copy of current	c Leadership. De considered in your hours sheet
Refer	ences:		
	Name	Position (Teacher, Coach, etc.)	Phone number or attached reference letter

NOTE: The cost of the outdoor and off-site activities associated with the course is to be fundraised by students and/or through an enhancement donated by parent(s)/guardian(s).

Please submit application with your course selection form.