

# **Claremont Sports Institute for Excellence**

## Principal or Vice Principal or Teacher Checklist (Golf)

Please provide your reference with a copy of this form. Explain that they may fax, email or mail it directly to Claremont. **This form does not need to be returned to the applicant for submission.**

Student Name: \_\_\_\_\_

Current School: \_\_\_\_\_ Current Grade: \_\_\_\_\_

Administrator Name: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

### **Student Qualities**

(Please rank student on a scale of 1 – 5 with 5 being the highest score)

	1	2	3	4	5
Achievement					
Effort					
Attendance					
Work Habits					
Social Responsibility					
Leadership					

### **General Comments**

---

---

---

---

Please submit this checklist via mail, fax or email to: ATTENTION: Shon Ryan, CSI Golf Program Coordinator at:

Claremont Secondary School  
4980 Wesley Road, Victoria, B.C. V8Y 1Y9  
Phone: 250-658-5221 Fax: 250-658-5387  
[sryan@saanichschools.ca](mailto:sryan@saanichschools.ca)

Application Deadline: **March 6, 2019**