

# Fraser Heights Integrated Math and Science Academy Application Form



## **Student Information**

Teacher Name Contact #/ email address  2.	Student's Last Name	Legal First Name	Preferred First Name and Pronouns	Pupil #
Mailing Address: Postal Code:  Home phone number: Cell phone number:  Parents names: Preferred language for phone calls:  Parents email: Students email:  A. <u>Student References</u> You will need two references that the selection committee may contact. One reference must be a teacher another reference should be from outside the classroom.  1  Teacher Name Contact #/ email address				
Mailing Address: Postal Code:  Home phone number: Cell phone number:  Parents names: Preferred language for phone calls:  Parents email: Students email:  A. Student References  You will need two references that the selection committee may contact. One reference must be a teacher an other reference should be from outside the classroom.  1  Teacher Name Contact #/ email address	Current Secondary School: _			
Parents names: Preferred language for phone calls:  Parents email: Students email:  A. Student References  You will need two references that the selection committee may contact. One reference must be a teacher an other reference should be from outside the classroom.  1	Mailing Address:			•
A. Student References  You will need two references that the selection committee may contact. One reference must be a teacher another reference should be from outside the classroom.  1	Home phone number:	Ce	ll phone number:	
A. Student References  You will need two references that the selection committee may contact. One reference must be a teacher an other reference should be from outside the classroom.  1	Parents names:	Preferred	language for phone calls:	
You will need two references that the selection committee may contact. One reference must be a teacher an other reference should be from outside the classroom.  1	Parents email:	Students	email:	
Teacher Name Contact #/ email address  2.	You will need two references tha	t the selection committee ma	ay contact. One reference mus	st be a teacher and
2	1			
	Teacher Name	Со	ntact #/ email address	
	2		ntact #/ email address	



## **B.** Student Profile

Please list your **5** most meaningful extracurricular activities in the past three years. Please be very specific and clear without the use of acronyms. These activities could include clubs, sports, organizations, hobbies or self-interest like reading or working on cars as an example. Also include when you were involved, your role and the approximate hours per week you were involved.

	Activity	When you were involved	Your role or position	Hours / week
1				
2				
3				
4				
5				

If more room is needed please feel free to attach a separate page



Student Applicant Signature

Date

C. Student Paragraphs
Please write a paragraph for the question below and limit it to <b>150 words</b> or less.
Please tell us why you would like to be part of the Math & Science Academy.
D. <u>BC Diploma Verification Sheet from MyEducation BC</u> Please attach a BC Diploma Verification sheet form MyEducation BC to the application. Fraser Heights Students will need to email the office at <u>Anderson k@surreyschools.ca</u> as it will be prepared for pick up at the office. For non-Fraser Heights students please ask your counselor for this.
E. Required Signatures  I hereby declare that the information on this application is, to the best of my knowledge, correct and complete and written without assistance from others. I understand that the Admission committee retains the right to verify information on my application. I am also aware that all review notes, reports and recommendations made by the committee are confidential.

Parent/Legal Guardian Signature



Date

## **Important Information and Dates**

The selection process for this program will involve student grades, references, a practical test, scientific problem solving task and possibly an interview.

Students **do not** have to have the pre-requisites of Pre-Calculus 11 and Science 10 completed before they apply. They must have it completed before they start the program in September 2024.

\*Please drop off all completed applications to the front office of Fraser Heights Secondary located at 16060 108<sup>th</sup> Ave. Surrey BC, by February 15, 2024. The office hours are from 7:45 to 3:30 pm during school days. If you prefer, please email the application to <a href="mailto:ahn\_i@surreyschools.ca">ahn\_i@surreyschools.ca</a>. If you email this, you will get confirmation that it has been received. If you do not get confirmation please contact me and bring it to my attention.

### **Important Dates:**

February 15<sup>th</sup> - Applications Due

February 21<sup>st</sup> or 22<sup>nd</sup> -Practical Test and Scientific Task. 3:15 – 4:15 or 4:30 – 5:30 on

both days. Students will be assigned to one of these sessions.

February 21<sup>st</sup> -Out of school applicants will be invited to attend an open house

1:00 pm. They will assigned to the 3:15 Practical Test on that day.



<sup>\*</sup>Students will be notified of their acceptance into the program in the middle of March 2024.