Acceleration Application Form (U1/2)

This document must be read in conjunction with the St Bernard’s College Acceleration Policy. Applications will only be accepted from students who have been invited to apply.

Name: ____________________________ Homeroom ___________

1. In the year 2016 I would like to undertake the following subject.
Subject: ____________________________ Code: ___________

Student reason for requesting acceleration:
__________________________________________

2. Student self assessment

<table>
<thead>
<tr>
<th>Subject</th>
<th>Poor</th>
<th>average</th>
<th>excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completion of homework</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Focus in class</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Submission of work by deadline</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>Independent study ability</td>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

3. Your parents also need to sign this form. In doing so they acknowledge that you are doing an accelerated subject that requires a greater workload from you and attention to the rules about that VCE subject.

Parent’s Signature ____________________________ Print Name ____________________________

This application must be lodged with the Director of Learning

Date received ____________________________

DECISION: YES, you are permitted to do this subject
NO, you are not permitted to do this subject

Date ____________________________ Signed: ____________________________

Ms Pauline Thompson (Director of Learning)