



# CHAOS 10

## Community, Heritage, Adventure, Outdoors and Skills 10

- **Application Deadline: March 11<sup>th</sup>, 2021**
- **Interviews will be held from March 30 through April 7, 2021**
- **All applicants will be notified of the outcome of their application on or before April 22th, 2021**

### Application Form for CHAOS 10

To apply, you need to send your completed package to Wood Street Centre School at 411 Wood Street, Whitehorse Yukon Y1A 2E9

### Your application package includes:

- Fully completed application form
- Personal Correspondence
- Two reference forms in sealed envelopes

### Student Information:

Name: \_\_\_\_\_ Gender: Male \_\_\_\_ Female \_\_\_\_

DOB: \_\_\_\_\_

Non-First Nation     First Nation: \_\_\_\_\_ d / m / y

Address (include postal code): \_\_\_\_\_

Home Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

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

### Parent Information:

Parent/Guardian: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

Evening Phone #: \_\_\_\_\_ Parent Email: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

Evening Phone #: \_\_\_\_\_ Parent Email: \_\_\_\_\_

### Semester/Program Preference:

- Fall semester only (CHAOS 10 will only be offered in fall semester)

Indicate all Experiential Programs you have applied to in your order of preference:

\_\_\_\_\_

### Personal Correspondence:

Please submit a handwritten letter of introduction. In your letter, you are asked to provide some background information telling a bit about yourself. In addition, please include why you are interested in participating in CHAOS 10, as well as what you expect to gain from a semester in the program.

### Student Commitment:

Students are expected to participate in all aspects of the program including all planned activities and trips. By signing up to be enrolled in CHAOS 10, you are expressing an interest in challenging, and pushing yourself as well as being a cooperative and active member of the group.

NOT ALL PARTS OF THIS PROGRAM ARE EASY, AND STUDENTS SHOULD NOT EXPECT IT TO BE.

**CHAOS 10  
Student Reference Form**

**Academic Reference:**

This form can be completed by one of the following people from your grade 7 – 9 school years:

- School Administrator (Principal or Vice Principal)
- Teacher
- School Counselor
- Community Education Liaison Coordinator (CELC)

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**Dear Reference:**

Thank you for taking the time to complete this form. The student whose name appears below has applied for admission to Community, Heritage, Adventure, Outdoors and Skills 10 (CHAOS 10). This reference is an important part of the application and your cooperation in providing a candid report will be greatly appreciated.

Please return the completed form to the student in a sealed envelope.

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Name of student: \_\_\_\_\_  
Name of school currently attending: \_\_\_\_\_  
Name of person completing this form: \_\_\_\_\_  
Position: \_\_\_\_\_  
Length of time acquainted with student: \_\_\_\_\_

**Please rate the applicant in the following areas. All completed forms will be kept confidential.**

	Never	Occasionally	Usually	Always
Relates well with peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Respects Rights/Property of Others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Shows Courtesy/Respect	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Works Well in Group Activities	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Demonstrates Leadership	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Exhibits Self-Confidence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Accepts Constructive Advice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Organizes Time and Materials	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Works Independently	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Listens/Follows Directions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participates in Class	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Demonstrates self-discipline	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Responds positively to challenges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Displays a balanced personality	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Brief explanation of why you feel that this student would be a good candidate for an experiential program that is not bound to the constraints of the traditional definition of the classroom.

Date: \_\_\_\_\_  
Contact Phone #: \_\_\_\_\_

Signature: \_\_\_\_\_  
email: \_\_\_\_\_

**CHAOS 10  
Student Reference Form**

**Personal Reference:**

This form can be completed by one of the following people from the community

- Family friend
- Family member
- Leader or Coach of extra-curricular group or team
- Chief, Councilor, Clan Leader, Elder

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Please return the completed form to the student in a sealed envelope.

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Name of student: \_\_\_\_\_  
Name of school currently attending: \_\_\_\_\_  
Name of person completing this form: \_\_\_\_\_  
Position: \_\_\_\_\_  
Length of time acquainted with student: \_\_\_\_\_

**Please write a brief explanation of why you feel this student would be a good candidate for an experiential program. Tell a bit about your connection and history with the student, as well as the characteristics or attributes that they have displayed that would make him/her a student worth considering for an experiential program. All completed forms will be kept confidential.**

Date: \_\_\_\_\_  
Contact Phone #: \_\_\_\_\_

Signature: \_\_\_\_\_  
email: \_\_\_\_\_