













Achieving excellence together

Dear Parent / Guardian

AFL Academy

Cecil Andrews College offers students the exciting opportunity to combine their school work with an intensive AFL pathway. We would like to invite your child to apply and attend our Specialist AFL Academy trial.

Highly talented and experienced teachers who cultivate a well-rounded education coordinate these programs to bring to our students. Our aim is to develop young adults into great athletes and performers and give them a clear direction into pathways of AFL.

This package will include information about the specific programs and what is expected in the trial, fees and enrolment.

AFL Academy Trials:

Friday, 31st May 2024, 12.30pm - 2.30pm Friday, 14th June 2024, 12.30pm - 2.30pm

If you have any questions please do not hesitate to contact our program coordinator regarding your child's entry into any of these programs.

We look forward to seeing, developing and nurturing the future talent of Cecil Andrews College.

Kind Regards

Maule

Mrs Kimberley Boulton

AFL Academy Coordinator

Mr Mario Tufilli

Principal





AFL Academy

The AFL Academy develops the skills and knowledge to be successful in the AFL industry as a player, umpire or coach. Our participants have a passion for AFL and a desire to work hard and improve. The program focuses on skill development, tactics, nutrition, as well as basic literacy and numeracy skills required for the workplace. We pride ourselves on providing a holistic education for students that involves supporting them with attendance, academics and pastoral care. We can achieve a variety of goals, given that we have 5 sessions a week (over 5 hours in total). Students are also involved in the positive behaviour system which acknowledges students for displaying positive behaviour around the school. We encourage both male and female students to apply as we plan on developing a female program in the near future.

Students will have the chance to demonstrate their ability to perform on a variety of platforms necessary for successful competition in the game of AFL. The trial will involve a combination of exercise testing, skills testing and skill-based games.

Trial Requirements

Student's trialing need to wear appropriate sports/football clothing and bring both a pair of football boots and runners; don't forget a drink bottle, snacks and your mouth guard. Selection requires a positive academic record and training attitude combined with the necessary skills and experience in Australian Rules Football. An applicant who has not received access to quality coaching but shows potential will be taken into consideration.

Specialist Compulsory Fees

All specialist subjects have compulsory fees, these fees are payable in addition to other core elective fees and voluntary contributions.

The 2024 AFL Academy fee is \$100.00 with a \$50.00 deposit. Deposits are required upfront when entering this program and are non-refundable. Students will also be required to purchase a specialist uniform and attend activities and events.

Please note that each year costs are reviewed and could differ. Please contact Manager of Corporate Services, Henry Van Vugh 9234 3400 if you require confirmation of fees.



I am applying for:













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AFL ACADEMY PROGRAMS APPLICATION FORM

Students must be Year 6 or Year 5 to complete this application form

Places in these programs are limited and students may only gain a place via application and audition. Students currently in Year 6 & Year 5 may apply for their Yr7 entry year programs respectively.

AFL Academy (Please provide Reference Contact on the follow page)	Attach a passport sized photo here Or email a clear photo to: CecilAndrews.Col@education.wa.edu.au
APPLICANTS DETAILS:	
Legal Name:	
Parent/Guardian Name:	
Current Primary School:	Year 6
Gender: Date of Birth:	Year 5
Australian Citizen: Yes / Other:	VISA #:
Address:	
Suburb:Post Co	ode:
Home Phone: Mobile:	
Email Address: (Please print clearly)	
OFFICE USE ONLY Application Full Enrolment Trial Application Received Attended Successful	Application Applicant Notified Not Successful of Outcome

Please explain why you would like to be part of your chosen program at Cecil Andrews College:
Do you consider yourself to have a disability, impairment or long-term condition that will require special assistance while completing your chosen program at Cecil Andrews College: YES / NO
APPLICATION PROCESS:
CHECK LIST: Include your most recent school report with this application. Complete the Health/Emergency Form (following) Please complete the relevant box below Attach a passport sized photo
STEP 1: COMPLETE THIS APPLICATION FORM, DELIVER / POST / EMAIL TO:
Specialist Program School Officer Post: Cecil Andrews College, PO Box 295, Armadale WA 6992 Email: CecilAndrews.Col@education.wa.edu.au Phone: 9234 3400
STEP 2: ATTEND YOUR TRIAL: (Please see information and requirements on page 2) All trials are held onsite at Cecil Andrews College, unless otherwise stated.
AFL AGARENY TRIALG
AFL ACADEMY TRIALS Friday, 31 st May 2024, 12.30pm - 2.30pm Friday, 14 th June 2024, 12.30pm - 2.30pm
Please provide a reference to support your application (e.g. AFL Coach)
References Name:Contact Number:
Organisation:

STEP 3: NOTIFICATION:

All applicants will be notified by email and post regarding their outcome.

HEALTH / EMERGENCY CONTACT FORM

STRICTLY CONFIDENTIAL

This information, that is required for each student participating in the Specialist application process; will assist the school and supervising teachers in the preparation and planning of the AFL Academy Trials to ensure that the child's welfare is well accounted for.

STUDENT DETAILS										
Student Name:					_ Date of Birth:					
Parent/Guardian Name:										
Address:					_Postcode:					
Telephone - Home:	Work:			Mobile	Mobile:					
Family Medical Centre:				Teleph	Telephone:					
Doctors Name:										
Medical details: Is your child subject to seizu safety during the Specialist of "yes", please give details:	trials?		Yes	ner conditi	on that	may aff	ect his o	r her —		
Is your child allergic to:	Penicillin		Any food							
Any other drug	Other		Ally lood							
Date of last tetanus vaccina	tion:									
Medication: Parents/Guardians are requipments of prescribed medications print on the day. Is your child presently taking	rior to the trial da	y. If a student i	uses an Asthma inh	naler, plea						
Does your child self-administer the medication?					Yes		No			
If "yes", state name of medic	cation, dosage ar	nd frequency o	f use:							
Does your child have a curre	ent Health Care A	Authorisation P	lan at school?		Yes		No			
Ambulance Cover:										
Yes No										
Other Information: Please provide any other informer care for your child.	ormation about y	our child, whic	h will enable Cecil <i>i</i>	Andrews (College	Staff to	provide	better — —		
Parent/Guardian Signature:				Date:						