

## Application for Admission to WVA 2011-2012

<b>Applicant Name</b> _____	<b>Application #</b> _____ <small>(Internal Use Only)</small>
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Thank you for your interest in Waterville Valley Academy.

Please return all items in the below Application Procedure Checklist to:	For more information about Waterville Valley Academy or to set up an interview and tour please contact:
<b>Waterville Valley Academy Admissions</b>	<b>Kimberly Berman Director of Admissions</b>
PO Box 270	<u>Phone</u> -603-236-4246 x115
Waterville Valley, NH 03215	<u>Fax</u> -603-236-9906
	<u>e-mail</u> - KBerman@gowva.org

### Application Procedure Checklist

- Application Form signed and returned by Applicant and Parent
- Non-refundable Application Fee in the amount of \$40 US payable to Waterville Valley Academy
- Most recent transcript or grade report
- Two Signed Academic Recommendation Forms
- One Signed Athletic Recommendation Form
- Signed Parent Commentary Form provided by parent
- Photo of the Applicant
- IEP Plan or 504 Plan, if any.

<b>Program Type Applied For:</b> <input type="checkbox"/> Alpine Racing <input type="checkbox"/> Freestyle <input type="checkbox"/> Snowboard
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<b>Resident Status</b>
<b>Applied For:</b> <input type="checkbox"/> Boarding Student (Tuition, Room & Board) <input type="checkbox"/> Day Student (Tuition Only)

Terms of Enrollment Applied for and Related Costs:		
Program Length	Tuition, Room & Board (before 4/30)	Tuition Only (before 4/30)
Program Length	Program Length	Program Length
<input type="checkbox"/> Five Month- 11/7/11 – 3/30/12*	<b>*\$28,825</b>	<b>*\$22,760</b>
<input type="checkbox"/> 1 <sup>st</sup> Semester (2 ½ months) 11/7/11 – 1/20/12 *	<b>*\$15,750</b>	<b>*\$12,350</b>
<input type="checkbox"/> Four Month – 12/5/11 – 3/30/12	<b>\$27,090</b>	<b>\$21,050</b>
<input type="checkbox"/> Six Week I – 12/5/11 – 1/20/12	<b>\$10,765</b>	<b>\$8,350</b>
<input type="checkbox"/> 2 <sup>nd</sup> Semester- (2 ½ months) 1/23/12 – 3/30/12	<b>\$18,650</b>	<b>\$14,400</b>
<input type="checkbox"/> Six Week II – 1/23/12 – 3/2/12	<b>\$10,765</b>	<b>\$8,350</b>

\* Each **alpine** student enrolled in the five month and 1<sup>st</sup> semester programs are required to attend the fall on-snow training camp (exact date and location to be determined). \$500 of the room and board for boarding students only will be applied toward the cost of this camp. Additional camp costs to cover travel, food and lodging expenses are TBD and are the responsibility of the student.

<b>Grade Applied For:</b> _____	<b>Gender:</b> <input type="checkbox"/> Male <input type="checkbox"/> Female
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**Applicant Information**

\_\_\_\_\_  
First Name Middle Name Last Name

\_\_\_\_\_  
Street Address City State Zip Code

\_\_\_\_\_  
Mailing Address (if different from street address) City State Zip Code

\_\_\_\_\_  
Applicant Home Phone # Applicant Cell Phone # Applicant e-mail Address

\_\_\_\_\_  
Age as of Date of Application Date of Birth Place of Birth

\_\_\_\_\_  
Country of Citizenship Applicant Social Security Number

Is the Applicant under an IEP or 504 Plan? \_\_\_\_\_ If so, please provide a copy.  
Yes No

Has the Applicant been dismissed or withdrawn from school for any reason or been in any other disciplinary difficulty outside of school? \_\_\_\_\_ If yes, please explain. \_\_\_\_\_  
Yes No

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Family Information**

**Mother**

\_\_\_\_\_  
First Name Middle Name Last Name

\_\_\_\_\_  
Street Address (if different from Applicant's) City State Zip Code

\_\_\_\_\_  
Mailing Address (if different from Applicant's) City State Zip Code

\_\_\_\_\_  
Mother's Home Phone # Mother's Cell Phone # Mother's Work Phone #

\_\_\_\_\_  
Mother's Occupation Mother's Place of Employment (Company & Address) Mother's e-mail Address

Best way to contact Mother: \_\_\_\_\_



**Education/Academics**

**Current School**

\_\_\_\_\_  
Name of Current School

\_\_\_\_\_  
Street Address of Current School

Type of School:  Public  Private/Parochial

\_\_\_\_\_  
Dates of Attendance at Current School

\_\_\_\_\_  
Mailing Address of Current School (if different from above)

\_\_\_\_\_  
Telephone # of Current School

\_\_\_\_\_  
Name of Guidance Counselor

\_\_\_\_\_  
Telephone # of Guidance Counselor

\_\_\_\_\_  
Fax # of Guidance Counselor

\_\_\_\_\_  
e-mail address of Guidance Counselor

**Other Schools Attended in Past 4 Years**

\_\_\_\_\_  
School Name

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Dates of Attendance

\_\_\_\_\_  
School Name

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Dates of Attendance

Grade Point Average: \_\_\_\_\_ Which tests you have taken? Attach copy of scores if taken.  SSAT  PSAT  SAT

Projected academic courses for the period Applicant is enrolled at Waterville Valley Academy:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Academic interests and school activities Applicant is involved in: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Academic Achievements/ Honors: \_\_\_\_\_

\_\_\_\_\_

**Athletic Information**

Current Snowsports Program Name \_\_\_\_\_ Coach Name \_\_\_\_\_ Coach Phone # and e-mail \_\_\_\_\_  
that Applicant participates in

**Alpine Only:** USSA # \_\_\_\_\_ USSA National Points: SL \_\_\_\_\_ GS \_\_\_\_\_ SG \_\_\_\_\_ DH \_\_\_\_\_

**Alpine Only:** FIS # \_\_\_\_\_ FIS Points: SL \_\_\_\_\_ GS \_\_\_\_\_ SG \_\_\_\_\_ DH \_\_\_\_\_

**Alpine Only:** J3/4/5 Accomplishments: \_\_\_\_\_

**Freestyle Only:** Top Results and Performances: Moguls \_\_\_\_\_ Aerials \_\_\_\_\_ Big Air \_\_\_\_\_  
Half Pipe \_\_\_\_\_ Slopestyle \_\_\_\_\_

**Snowboard Only:** Top Results and Performances: SL \_\_\_\_\_ GS \_\_\_\_\_ HP \_\_\_\_\_  
BC \_\_\_\_\_ Slopestyle \_\_\_\_\_

Past Competition Programs and Training Camps:

\_\_\_\_\_  
Name of Program \_\_\_\_\_ Coach \_\_\_\_\_

\_\_\_\_\_  
Name of Program \_\_\_\_\_ Coach \_\_\_\_\_

\_\_\_\_\_  
Name of Program \_\_\_\_\_ Coach \_\_\_\_\_

Athletic Interests/Athletic Achievements other than the Applicant's snowsport: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Other**

How did you hear about Waterville Valley Academy? \_\_\_\_\_

\_\_\_\_\_

List relatives who have attended Waterville Valley Academy and years attended: \_\_\_\_\_

\_\_\_\_\_

Will Applicant train as a weekend athlete with the BBTS Ski Club program either before or after attending Waterville Valley Academy this season?  Yes  No If yes, from when to when? \_\_\_\_\_

## Questions to be Completed by Applicant

In order to better know you as an individual who is interested in engaging in the academic/athletic experience at WVA, it is essential for WVA administration, faculty and coaches to understand your commitment as a student and an athlete. These questions are designed to help us get to know you better. Please complete the following on a separate sheet of paper.

### Question 1

Bearing in mind the philosophy of Waterville Valley Academy as found in the WVA brochure, briefly describe why you think this school would be right for you.

### Question 2

Describe your perfect day.

### Question 3

What was one of the most important changes or influences in your life and why?

### Question 4

What are your academic and athletic goals for the upcoming winter? Describe how you plan to achieve these goals.

### Question 5

Describe why you think that you will excel academically and athletically in an environment that requires independence, self-respect and respect for others?

### Question 6

What four words best describe who you are and why you will succeed at WVA?

### Question 7

What do you think it means to be part of a school community?

### Exercise

Draw a picture of yourself.

WVA does not discriminate on the basis of race, color, national or ethnic origin, sex, sexual orientation or disability in its administration of its educational, athletic or admission policies or in other programs or policies administered by WVA.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

### For Internal Use Only:

<b>Applicant #:</b> _____ <b>Program Type:</b> <input type="checkbox"/> Alpine Racing <input type="checkbox"/> Freestyle <input type="checkbox"/> Snowboard	<b>Acceptance Date:</b> _____ <b>Applicant Accepted by</b> _____
<b>Residence Status:</b> <input type="checkbox"/> Boarding Student (Tuition, Room & Board) <input type="checkbox"/> Day Student (Tuition Only)	<b>Director of Admissions:</b> _____ <b>Dean of Studies:</b> _____ <b>Headmaster:</b> _____ <b>Head Coach for applicable Snow Sport:</b> _____ <b>Director of Athletics:</b> _____ <b>CEO:</b> _____
<b>Program:</b> <input type="checkbox"/> Five Month-11/1 through 4/1* <input type="checkbox"/> Four Month-11/29 through 4/1 <input type="checkbox"/> Two and a half Month-1/17 through 4/1 <input type="checkbox"/> Six Week -11/29 through 1/14 <input type="checkbox"/> First Semester – 11/1 -1/11*	



# Waterville Valley Academy

## Academic Recommendation

<b>Application #</b> _____
<small>(Internal Use Only)</small>

<b>To Applicant: This section to be completed by Applicant and provided by Applicant to person providing academic recommendation:</b>
Name of Applicant:
Home Address of Applicant:
Home School Name of Applicant:
Applicant Competition Program: <input type="checkbox"/> Alpine Racing <input type="checkbox"/> Freestyle <input type="checkbox"/> Snowboard
Grade Level Applicant is Applying for:
Name of Person Providing Recommendation:
Title/Capacity of Person Providing Recommendation:
<p>WAIVER OF RIGHT OF ACCESS TO LETTER OF RECOMMENDATION (OPTIONAL): The Family Educational Rights and Privacy Act of 1974 allows a candidate for admission or employment to waive his/her right of access to confidential letters or statements written on his/her behalf if the recommendation is used solely for the purpose of admission or employment, and if the candidate, upon request, is notified of the names of all persons making such recommendation on his/her behalf.</p> <p>I hereby waive my right of access to this recommendation and appropriate attachments written on behalf of my application of admission to Waterville Valley Academy. This waiver is effective only insofar as the recommendation is issued solely for the purposes stated above.</p>
_____ Signature of Applicant
_____ Date of Signature

<b>To person making recommendation: The above Applicant is applying to Waterville Valley Academy and has given the WVA Admissions Office your name to provide an academic recommendation. Please complete this form, sign it and return it to the address below:</b>
<b>Waterville Valley Academy Admissions</b>
PO Box 270
Waterville Valley, NH 03215



**Background Information on Applicant**

How long have you known Applicant and in what capacity? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What courses have you taught this Applicant? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What has been this Applicant's greatest addition to your classroom/school? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe the Applicant's strengths and weaknesses. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please evaluate the characteristics of the Applicant set forth below: A=superior; B=above average; C=average; D=below average; U= unable to evaluate**

	A	B	C	D	U		A	B	C	D	U
Ability to communicate in writing						Task-oriented					
Ability to communicate verbally						Imagination					
Motivation						Inter-personal skills					
Maturity						Competitiveness					
Intellectual Promise						Ability to work independently					
Self-confidence						Willingness to deal with setbacks					
Initiative						Overall potential					
Leadership Skills						Originality					
Appropriateness of behavior						Concern for others					

**Overall Rating of Applicant**

Waterville Valley Academy is a five month ski academy designed for full time student athletes in grades 6-12 who are dedicated to pursuing the highest level of performance in alpine racing, freestyle skiing and snowboarding in parallel with an individualized academic program. WVA integrates each WVA student's home school curriculum (via 1:1 or 1:2 WVA faculty driven individualized studies) with his or her athletic training and competition schedule.

You recommend Applicant to Waterville Valley Academy with the following overall rating (5 being strongly recommended and 1 being not recommended at all. Overall Rating= \_\_\_\_\_

Please add any additional information that you believe Waterville Valley Academy should know about the Applicant.

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**Information Regarding Person Making Recommendation**

_____ Recommender's Position/Title	_____ Recommender's FAX #
_____ Recommender's Employer	_____ Recommender's e-mail address
_____ Recommender's Business Street Address	_____ Recommender's Mailing Address, if different
_____ Recommender's Business Phone #	

\_\_\_\_\_  
Recommender's Signature

\_\_\_\_\_  
Recommender's Printed Name

\_\_\_\_\_  
Date of Signature

# Waterville Valley Academy Academic Recommendation

<b>Application #</b> _____ <small>(Internal Use Only)</small>
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**To Applicant: This section to be completed by Applicant and provided by Applicant to person providing academic recommendation:**

Name of Applicant:
Home Address of Applicant:
Home School Name of Applicant:
Applicant Competition Program: <input type="checkbox"/> Alpine Racing <input type="checkbox"/> Freestyle <input type="checkbox"/> Snowboard
Grade Level Applicant is Applying for:
Name of Person Providing Recommendation:
Title/Capacity of Person Providing Recommendation:

**WAIVER OF RIGHT OF ACCESS TO LETTER OF RECOMMENDATION (OPTIONAL):** The Family Educational Rights and Privacy Act of 1974 allows a candidate for admission or employment to waive his/her right of access to confidential letters or statements written on his/her behalf if the recommendation is used solely for the purpose of admission or employment, and if the candidate, upon request, is notified of the names of all persons making such recommendation on his/her behalf.

I hereby waive my right of access to this recommendation and appropriate attachments written on behalf of my application of admission to Waterville Valley Academy. This waiver is effective only insofar as the recommendation is issued solely for the purposes stated above.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Signature

**To person making recommendation: The above Applicant is applying to Waterville Valley Academy and has given the WVA Admissions Office your name to provide an academic recommendation. Please complete this form, sign it and return it to the address below:**

<b>Waterville Valley Academy Admissions</b>
PO Box 270
Waterville Valley, NH 03215

**Background Information on Applicant**

How long have you known Applicant and in what capacity? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What courses have you taught this Applicant? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What has been this Applicant's greatest addition to your classroom/school? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please describe the Applicant's strengths and weaknesses. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please evaluate the characteristics of the Applicant set forth below: A=superior; B=above average; C=average; D=below average; U= unable to evaluate**

	A	B	C	D	U		A	B	C	D	U
Ability to communicate in writing						Task-oriented					
Ability to communicate verbally						Imagination					
Motivation						Inter-personal skills					
Maturity						Competitiveness					
Intellectual Promise						Ability to work independently					
Self-confidence						Willingness to deal with setbacks					
Initiative						Overall potential					
Leadership Skills						Originality					
Appropriateness of behavior						Concern for others					

**Overall Rating of Applicant**

Waterville Valley Academy is a five month ski academy designed for full time student athletes in grades 6-12 who are dedicated to pursuing the highest level of performance in alpine racing, freestyle skiing and snowboarding in parallel with an individualized academic program. WVA integrates each WVA student's home school curriculum (via 1:1 or 1:2 WVA faculty driven individualized studies) with his or her athletic training and competition schedule.

You recommend Applicant to Waterville Valley Academy with the following overall rating (5 being strongly recommended and 1 being not recommended at all. Overall Rating= \_\_\_\_\_

Please add any additional information that you believe Waterville Valley Academy should know about the Applicant.

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**Information Regarding Person Making Recommendation**

_____ Recommender's Position/Title	_____ Recommender's FAX #
_____ Recommender's Employer	_____ Recommender's e-mail address
_____ Recommender's Business Street Address	_____ Recommender's Mailing Address, if different
_____ Recommender's Business Phone #	

\_\_\_\_\_  
Recommender's Signature

\_\_\_\_\_  
Recommender's Printed Name

\_\_\_\_\_  
Date of Signature

# Waterville Valley Academy Athletic Recommendation

<b>Application #</b> _____ <small>(Internal Use Only)</small>
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**To Applicant: This section to be completed by Applicant and provided by Applicant to person providing athletic recommendation:**

Name of Applicant:
Home Address of Applicant:
Home School Name of Applicant:
Applicant Competition Program: <input type="checkbox"/> Alpine Racing <input type="checkbox"/> Freestyle <input type="checkbox"/> Snowboard
Grade Level Applicant is Applying for:
Name of Person Providing Recommendation:
Title/Capacity of Person Providing Recommendation:

**WAIVER OF RIGHT OF ACCESS TO LETTER OF RECOMMENDATION (OPTIONAL):** The Family Educational Rights and Privacy Act of 1974 allows a candidate for admission or employment to waive his/her right of access to confidential letters or statements written on his/her behalf if the recommendation is used solely for the purpose of admission or employment, and if the candidate, upon request, is notified of the names of all persons making such recommendation on his/her behalf.

I hereby waive my right of access to this recommendation and appropriate attachments written on behalf of my application of admission to Waterville Valley Academy. This waiver is effective only insofar as the recommendation is issued solely for the purposes stated above.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date of Signature

**To person making recommendation: The above Applicant is applying to Waterville Valley Academy and has given the WVA Admissions Office your name to provide an athletic recommendation. Please complete this form, sign it and return it to the address below:**

<b>Waterville Valley Academy Admissions</b>
PO Box 270
Waterville Valley, NH 03215

**Background Information on Applicant**

How long have you known Applicant and in what capacity? \_\_\_\_\_

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For which sport(s) have you coached this Applicant? \_\_\_\_\_

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What has been this Applicant's greatest addition to your team/club? \_\_\_\_\_

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Please describe the Applicant's strengths and weaknesses. \_\_\_\_\_

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**Please evaluate the characteristics of the Applicant set forth below: A=superior; B=above average; C=average; D=below average; U= unable to evaluate**

	A	B	C	D	U		A	B	C	D	U
Skill level						Coordination					
Self-direction						Energy level					
Self-motivation						Ability to handle stressful situations					
Maturity						Competitiveness					
Ability to communicate with others						Ability to work independently					
Self-confidence						Willingness to accept change					
Initiative						Willingness to accept varying situations					
Leadership Skills						Willingness to deal with setbacks					
Ability to deal with poor performance						Overall athletic potential					

**Overall Rating of Applicant**

Waterville Valley Academy is a five month ski academy designed for full time student athletes in grades 6-12 who are dedicated to pursuing the highest level of performance in alpine racing, freestyle skiing and snowboarding in parallel with an individualized academic program. WVA integrates each WVA student's home school curriculum (via 1:1 or 1:2 WVA faculty driven individualized studies) with his or her athletic training and competition schedule.

You recommend Applicant to Waterville Valley Academy with the following overall rating (5 being strongly recommended and 1 being not recommended at all. Overall Rating= \_\_\_\_\_

Please add any additional information that you believe Waterville Valley Academy should know about the Applicant.

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**Information Regarding Person Making Recommendation**

_____ Recommender's Position/Title	_____ Recommender's FAX #
_____ Recommender's Employer	_____ Recommender's e-mail address
_____ Recommender's Business Street Address	_____ Recommender's Mailing Address, if different
_____ Recommender's Business Phone #	

\_\_\_\_\_  
Recommender's Signature

\_\_\_\_\_  
Recommender's Printed Name

\_\_\_\_\_  
Date of Signature