



CTA WEST APPLICATION

APPLICATION CHECKLIST

Please attach requested items in order to your application.

- \$60 CDN Application Fee (Make cheques payable to 'CTA West Basketball')
- Completed CTA West Application
- Education Documents
 - High School Transcripts
 - Test Scores if available (ACT, SAT)
- Letter of Recommendation from Principal
- Police Check from your Home Province (state or territory)
- Vulnerable Sector Check from your Home Province (state or territory)

Mail completed application to:

CTA West Admissions
9 Crestbrook Pl SW
Calgary, AB
T3B 0A1 CANADA

For any questions, please contact info@ctawest.com



CTA WEST APPLICATION

PLEASE PRINT CLEARLY IN INK & RETURN APPLICATION AND COMPLETED CHECKLIST ITEMS WITH \$60 CDN NON-REFUNDABLE APPLICATION FEE.

Today's Date: _____

Type of Housing: Resident of Calgary Dormitory Billet Family

Graduation Date if applicable:

Grade Entering: Post Grad Grade 12 Grade 11 Grade 10 Grade 9

STUDENT INFORMATION

Family/Last Name: _____

First Name: _____

Preferred Name: _____

Date of Birth (Month/Day/Year): _____ Current Age: _____

Permanent Home/Street Address: _____

City: _____ Province/State: _____ Postal/Zip Code: _____

Country of Citizenship: _____

Country of Birth: _____

Home Phone Number: _____

Student Cell: _____

Student Email: _____



SOCIAL MEDIA HANDLES

Instagram: _____

Snapchat: _____

Twitter: _____

EDUCATION (SCHOOL CURRENTLY ATTENDING)

School Name: _____

Street Address: _____

City: _____ Prov: _____ Postal Code: _____

School Phone: _____

Teacher/Counsellor: _____

Current Grade Level: _____

Current Grade Average (GPA/Percentage/Grade Letter): _____

Estimated Graduation
Date: _____

INTERNATIONAL STUDENTS

Do you have a Canadian Permanent Resident Card? _____

Permanent Resident Number: _____

Passport Number: _____

Will you need an Student Visa? Yes No



MEDICAL INFORMATION

Height: _____ Weight: _____

Does the applicant have any health problems that may limit physical activity? Yes No
If yes, please explain:

Is the applicant currently under the care of a physician? Yes No
If yes, please explain:

Name of Physician: _____ Phone Number: _____

Has the applicant consulted a psychiatrist and/or psychologist? Yes No
If yes, please explain:

Is the applicant taking any medication on a regular basis? (Insulin, Ritalin, etc) Yes No
If yes, please list:

Has the applicant been involved with any law enforcement agency, used illegal substances or been treated for drug, alcohol or other substance abuse? Yes No
If yes, please explain:

Are there any other medical, emotional or physical needs that the Academy should be aware of? Yes No
If yes, please explain:



FAMILY INFORMATION

Who does the applicant live with?

Mother Father Both Parents Other: _____

Are the applicant's parents/guardians divorced or separated? Yes No

If yes, who has legal custody of the applicant? _____

Parent Information (Mother)

Name: _____

Home Address: _____

City / Prov / State / Postal Code: _____

Country: _____

Contact Phone: _____

Email Address: _____

Employer: _____

Title: _____

Business Phone: _____

Parent Information (Father)

Name: _____

Home Address: _____

City / Prov / State / Postal Code: _____

Country: _____

Contact Phone: _____

Email Address: _____

Employer: _____

Title: _____

Business Phone: _____

Siblings (Please provide names and ages):



ABOUT YOU

Please answer the questions below to assist the Admissions Committee and Coaching Staff in becoming better acquainted with you, your ideas and your goals:

Objectives: List two short-term goals and two long-term goals. Please be specific:

Short Term: _____

Long Term: _____

Describe your best performance and favourite basketball memory. Provide team results (HS/club), team record, rankings, championships.

What was the highest level of basketball you played at (regional, provincial, national)? Please provide details.

List other sports you enjoy playing / hobbies / special interests.



Please provide details of any volunteering or community services you have done.

Name a person you have met who has influenced you in a positive way and tell why?

Briefly describe yourself as a person. Include the qualities you like best and those you can improve on.

How would you rate yourself as a student?

If applying to live in dorms or with billets, is this your first experience living away from home?

Yes No

If yes, please explain:



STATEMENT OF ACCURACY

By signing below, I certify the information provided on all pages of this application is accurate and true to the best of my knowledge. If accepted, I/we agree to abide by the CTA West Player Contract, including:

1. To refrain from use of alcohol, tobacco and tobacco products, and all drugs.
2. To treat my classmates, the staff, and all people associated with CTA West with courtesy, dignity, respect and to refrain from language or conduct which may bring myself or CTA West into disrepute.
3. To comply with the CTA West dress code.
4. To follow the rules of good sportsmanship and to represent myself, my school and my coach's honorably and with pride.
5. To apply myself with diligence and dedication to become the best student, athlete and person I can be.
6. To follow the CTA West Social Media Policy.

Signature of Applicant: _____

Date: _____

Signature of Parent/Guardian: _____

Date: _____

CTA West does not discriminate on the basis of race, religion, sex or national origin in the athletic or academic programs, admissions policies or any other school activity.