

Athlete Information

Last Name: _____ First Name: _____

Age: _____ Sport/Activity: _____

Level of Performance: National Provincial

Please complete the following as the Provincial/National level training supervisor for this student-athlete

Coach's Name: _____

Team / Club Affiliation: _____

Competitive League (if applicable): _____

Business Number/Cell Phone: _____

Email Address: _____

Training Centre/Location: _____

How long have you worked with this student athlete?

Performance

Please comment on the applicant's level of performance (i.e. ranking, level of competition, major tournament results etc.) and/or the future potential of the student-athlete.

Please comment on the coachability and attitude of applicant.

Training Schedule

Please outline your student-athlete's weekly training schedule (days and times). Please indicate any training that is NOT associated with your primary training/team with an *.

Games and competitions are not to be included.

Note: For team sports, hours of private / elective training will not be included when calculating the minimum requirement. Hours must be team related training.

DAY	MON	TUES	WED	THURS	FRI	SAT	SUN
TIME (from – to)							
TOTAL HOURS							

In order to be eligible for TDSB High Performing Athlete hub, student-athletes must be:

- ***Training for a minimum of 12 hours (elementary)/15 hours (secondary) per week with a maximum of 3 hours being on the weekend***
- ***Competing at a Provincial level (i.e. recognized by a provincial/national standard)***

Examples of Eligible Competition/Performance	Examples of Ineligible Competition/Performance
Athletes with Provincial or National level standings (e.g. Competitive Swimming National Qualifying Times, Golf Canada handicap)	Rep teams playing in local or provincial leagues e.g. Ontario Volleyball Association Greater Toronto Hockey League Greater Metro Hockey League Toronto Baseball Association Greater Toronto Baseball League Ontario Basketball Association Toronto Soccer Association Ontario Lacrosse Association
Athletes participating on Junior Provincial, Provincial, Junior National or National level teams	

I verify that the applicant meets the training requirements and the competition/performance levels required for eligibility:

Coach Name (print)

Coach Signature

Date

Once completed, please submit this form via email to HPA@tdsb.on.ca from your professional email address.
Please include the student-athlete/applicant's First and Last name in the subject line.