



# Tiger Softball Academy

2024 – 2025 Application Package

**Attention Parents/Guardians** – Please keep this page of the Tiger Softball Academy Registration Package for future reference.

## **Tommy Douglas Collegiate**

130 Bowlt Crescent  
Saskatoon, SK S7M 0L1  
(306) 683 - 7916  
(306) 683 – 7910

Since the fall of 2009 – 2010 Tommy Douglas Collegiate has been the site of a Softball Academy. This program is open to all grade 9, 10, 11 and 12 students. Grade 9 students will meet required outcomes in Physical Education and Career Education. Grade 10 students will receive a Wellness 10 and Career Work Exploration 10 credits. Grade 11/12 students will receive a PE 20/30 and Geography 30 or an online credit.

This program requires an application to be completed by Friday, April 12, 2024. The Softball Academy instructors will be Don Bates, Former Head Coach: Canadian Men’s National Team and Trevor Ethier: Former Canadian Men’s National Team Pitcher, and current Women’s Jr. National Team Coach.

## **Application Deadline**

Applications must be submitted to:

**Tommy Douglas Collegiate**  
Student Services Office

**Friday, April 12, 2024, by 3:00 PM**

## **Volunteer Hours**

Successful applicants must be prepared to work volunteer hours to complete curricular requirements for their Career Work Education credit and their Physical Education credit.

## Costs

The cost to the students for the academy will be \$500.00. Students enrolled for a second term will pay \$350.00 as they already have clothing apparel. There may be one or more fundraising events which will require student time only.

**Acceptance into this program is not based on the ability to pay. If cost is a deterrent, please contact Mr. Dave Fisher, Principal at Tommy Douglas Collegiate at (306) 683 – 7910.**

## Application

Please provide a **1 to 2-page essay** explaining why you would like to be in the Softball Academy Program. Please include in your essay the number of years you have participated in softball, primary positions played and level of competition.

The application forms must be submitted to the Student Services Office at Tommy Douglas Collegiate by: **3:00 p.m. on Friday, April 12, 2024.**

**All applicants will be notified of their selection status via email by Monday, April 22, 2024.**

**NOTE:** Students should complete a registration package in their home high school during February. If a student is a successful applicant for the Softball Academy, a Student Services Counsellor will re-schedule classes to accommodate participation in this program.



# Tiger Softball Academy

2024 – 2025 Application Form

<b>School Currently Attending:</b>	<b>Current Grade:</b>

Please note: The degree to which you neatly, thoroughly, and accurately complete this application package may contribute to the success of your application.

## Student Information

Last Name	First Name	Middle Name	Gender	<input type="checkbox"/> Unspecified
			<input type="checkbox"/> Male	<input type="checkbox"/> Female
Street Address	City	Province	Postal Code	
Phone ( ) - ( )	Cell ( ) - ( )	Date of Birth (YYYY – MMM – DD)		
Email Address				

## Mother

Last Name	First Name	Email Address		
Street Address (if different from applicant)	City	Province	Postal Code	
Phone ( ) - ( )	Cell ( ) - ( )	Work ( )		

## Father

Last Name	First Name	Email Address		
Street Address (if different from applicant)	City	Province	Postal Code	
Phone ( ) - ( )	Cell ( ) - ( )	Work ( )		

## Fitness

Students will be very physically active in the program and must possess a good fitness level.

Are you capable of physically rigorous activity?

Yes      Maybe      No  
           

Rank yourself on your level of fitness

Poor 1    2    3    4    5    Excellent  
           

## References

- Your references may be asked to review appropriate sections of this application. Please ask your references' permission to use their name.
- Your teacher reference will be asked to provide information relating to the following: punctuality, attendance, and academic ability.
- Your coach reference will be asked to provide information relating to the following: commitment, punctuality, skill level, work ethic, leadership and overall, what type of player you are.

### Teacher Reference

Last Name                      First Name                      School Taught At:

Home Phone Number                      Cell                      School Phone Number:  
 (   )                      -                      |   (   )                      |   (   )                      -

### Coach Reference

Last Name                      First Name

Home Phone Number                      Cell                      Work Phone Number:  
 (   )                      -                      |   (   )                      |   (   )                      -

## Responsibility And Dependability

The Softball Academy program will require a great deal of student responsibility regarding academic work, independent research, observing and reporting, skill development, and cooperation with other students.

How do you rate yourself in the following areas?

Seldom    1    2    3    4    5    Always

- |  |                          |                          |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. I work hard at school and complete my work on time  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. I willingly accept the directions of teachers       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. I work well with other students                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. I have a positive attitude                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. I am able to work with people I do not like         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. I am able to work independently without supervision | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. I do not blame others when things do not go well    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. I am physically determined                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. I am mentally determined                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. I appreciate good health and eat nutritious food   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. I willingly volunteer during group work            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. I recognize when work needs to be done             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. I am honest and trustworthy                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. I enjoy being in the outdoors                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. I love to learn                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

## Medical

Do you have any medical or emotional conditions we should be aware of?

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Student Hospitalization Number

Hospital Preference:

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## Signatures

Student

Date

(yyyy-mmm-dd)

Parent

Date

(yyyy-mmm-dd)

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