



**ONTARIO  
SCIENCE  
CENTRE**

# Science School 2010/2011

## STUDENT APPLICATION FORM

**PLEASE MAIL YOUR APPLICATION PACKAGE TO:**

Science School, Ontario Science Centre, 770 Don Mills Road, Toronto, ON M3C 1T3

Application packages must be received by mail no later than **April 9, 2010** to be considered for entrance into either the September or the February semester of the 2010/2011 academic year. **Application packages sent by fax will NOT be accepted.**

**Please note: Student application, transcripts and teacher recommendations may be sent separately.**

### 1. CONTACT INFORMATION:

Student Name \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Date of Birth Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_ E-mail \_\_\_\_\_

Current School \_\_\_\_\_ School Phone (\_\_\_\_) \_\_\_\_\_

School Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

### 2. SEMESTER AND COURSE SELECTION:

Choose the semester and courses you prefer. If you are willing to be considered for either semester, please fill out course choices on both lines:

**First Semester** (Sept 10-Jan 11)       Advanced Functions (MHF4U)       Biology (SBI4U)       Chemistry (SCH4U)       Physics (SPH4U)

**Second Semester** (Feb-June 11)       Biology (SBI4U)       Calculus and Vectors (MCV4U)       Chemistry (SCH4U)       Physics (SPH4U)

### 3. CURRENT COURSES:

In the chart below, list the courses that you are registered for in the second semester of the 2009/10 school year. Include the mark you have earned at the time you filled in this application. You may need to ask your teacher for your mark.

Subject and Grade	Mark	Teacher's Name	Date

### 4. ATTACHMENTS:

**Personal Essay.** On a separate sheet, please write a **one-page** essay about how the science school will benefit you and how you can contribute to the science school. Include personal achievements and/or contributions that you feel are relevant. **Please note:** Only one side of one page will be reviewed.

**Official Transcript.** An official transcript of all high school marks earned including all courses completed in the first semester of this school year is required. You will be expected to bring a copy of your second semester report card if you proceed to the interview stage.

### 5. SIGNATURES:

\_\_\_\_\_  
Student Signature      Parent/Guardian Name      Parent/Guardian Signature      Date: Month / Day / Year

### 6. HOW DID YOU FIND OUT ABOUT THE ONTARIO SCIENCE CENTRE SCHOOL?

*This information is collected under the authority of the Centennial Centre of Science and Technology Act for registration purposes.*

Questions about this collection should be directed to:

Associate Director, Education, Ontario Science Centre, 770 Don Mills Road, Toronto, ON M3C 1T3 Phone: 416-696-4620



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## CONFIDENTIAL TEACHER RECOMMENDATION REPORT

**PLEASE MAIL THIS FORM TO:**

**Science School, Ontario Science Centre, 770 Don Mills Road, Toronto, ON M3C 1T3**

*Two confidential teacher recommendation reports per applicant are required.  
One of these recommendations must be from a science or mathematics teacher.*

Please fill out the following recommendation form for this student applying to the Science School at the Ontario Science Centre for the 2010/2011 school year. Your comments are very important to the selection process.  
**This form must be received no later than April 9, 2010.**

### 1. STUDENT AND TEACHER INFORMATION:

Student Name \_\_\_\_\_

School \_\_\_\_\_ School Phone (\_\_\_\_) \_\_\_\_\_

Teacher Name \_\_\_\_\_ Subject \_\_\_\_\_

Signature \_\_\_\_\_

In what capacity do you know this applicant? \_\_\_\_\_

### 2. STUDENT EVALUATION:

*Please rate the student with respect to the following characteristics by placing a check (✓) in the appropriate column.*

- 1 = below average**
- 2 = average**
- 3 = good, top 20%**
- 4 = excellent, top 10%**
- 5 = outstanding, top 2% of the students you have taught**

	1	2	3	4	5
Ability to accept different roles in group settings					
Independence					
Ability to criticize constructively					
Ability to receive constructive criticism					
Perseverance					
Self-confidence					
Assertiveness					
Creativity					
Clarity of thought and expression					
Curiosity (scientific or otherwise)					
Initiative/Motivation					
Honesty/Integrity					
Willingness to accept challenges					
Ability to accept responsibility					
Academic ability					

### 3. ANECDOTAL REPORT:

*On a separate page, please submit a short anecdotal report to help us assess the suitability of this student for the Science School. Expand on the above characteristics, describe other qualities that you believe to be relevant and comment on why the student and the school would benefit from his or her attendance.*

**Thank you for your comments.** If you have any questions, please contact the Education and Special Programs Coordinator at 416-696-4620 or e-mail: science.school@osc.on.ca

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School \_\_\_\_\_ School Phone (\_\_\_\_) \_\_\_\_\_

Teacher Name \_\_\_\_\_ Subject \_\_\_\_\_

Signature \_\_\_\_\_

In what capacity do you know this applicant? \_\_\_\_\_

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