



Digital Arts and Technology Academy **(D.A.T.A.)**



Student Application

Application Due to TNT Coordinator – February 1, 2024

(Please print legibly in blue or black ink.)

Date: _____		Current Grade: _____	
Name: _____			
	<i>Legal Last</i>	<i>Legal First</i>	<i>Usual First</i>
Mailing Address: _____			
	<i>Street Address / PO Box</i>	<i>City</i>	<i>Postal Code</i>
Home Phone: _____		Parent/Guardian Cell: _____	
Student PEN: _____		Student Cell: _____	
	<i>9 digit number</i>		
Parent/Guardian Email: _____		Student Email: _____	
Home School: _____		TNT Coordinator: _____	
_____		_____	
<i>Applicant Signature</i>		<i>TNT Coordinator Signature</i>	

<ul style="list-style-type: none"> • My child's demographic, medical, and permission status information has been updated with their home school 	Yes / No (circle one)
<ul style="list-style-type: none"> • I allow SD73 to use any work or school related picture(s) of my child for the purpose of promotion and communication for the program 	Yes / No (circle one)
_____	_____
<i>Parent/Guardian Name (please print)</i>	<i>Parent/Guardian Signature</i>

Keep a Copy

You are strongly encouraged to keep a copy of your application as well as all future forms, paperwork, and emails for your personal records.

Application Checklist

For assistance or more information, please contact your TNT Coordinator or Counsellor.
Deliver completed application package no later than **February 1, 2024**, to your TNT Coordinator.

All items below are required:		Page(s)	Completed & Attached
1	Program fee of \$350.00 to be included with this application (Please make cheque payable to "SD73")		<input type="checkbox"/>
2	Student Application Form	1	<input type="checkbox"/>
3	Application Checklist – this page	2	<input type="checkbox"/>
4	D.A.T.A. Program Parent Statement Form	3	<input type="checkbox"/>
5	D.A.T.A. Program – Student Statement Form	4	<input type="checkbox"/>
6	D.A.T.A. Program – Essay Activity	5-6	<input type="checkbox"/>
7	D.A.T.A. Program – Applicant Evaluation #1	7	<input type="checkbox"/>
8	D.A.T.A. Program – Applicant Evaluation #2	8	<input type="checkbox"/>
9	Student Education / Transition Plan	9	<input type="checkbox"/>
10	TNT Statement of Recommendation	10	<input type="checkbox"/>
11	D.A.T.A. Program – Interview Notes	11-12	<input type="checkbox"/>
12	D.A.T.A. Program – Applicant Profile	13	<input type="checkbox"/>
13	Secondary Transcript, Attendance, and Conduct Reports <i>(TNT to obtain from admin/counselling)</i>		<input type="checkbox"/>



D.A.T.A. Program - Parent Statement Form



Parent/Guardian - Statement of Readiness

Parent/Guardian Name: _____ Date: _____

The applicant has indicated an interest in enrolling in the D.A.T.A. program at Valleyview Secondary. Keeping in mind that they would be studying in an adult learning environment in which they are expected to be self-motivated, self-directed, and not reliant on others to assist in the organization of their learning activities, we ask you to comment on the following:

1. Why do you think your child should participate in the D.A.T.A. program?

2. Please comment on your child's suitability for a program that requires consistent attendance, effort, and ability to follow instructions.

Parent/guardian to initial each line.

I acknowledge my child:

____ Will be taught at Valleyview Secondary School in semester one (Sept-Jan)
Initial

____ Can participate in extra-curricular activities at home school outside of classroom
Initial hours

____ Will pay the program fee of \$350.00
Initial



D.A.T.A. Program – Student Statement Form



Student - Statement of Commitment

Student Name: _____ Date: _____

1. Explain the skills and talents you have that will help you to succeed in this program.

2. With limited seats available, please describe why you are a good candidate for the Digital Arts and Technology Academy?



SCHOOL DISTRICT NO. 73
(Kamloops - Thompson)

D.A.T.A. - Essay Activity



Trades and Transitions
SCHOOL DISTRICT NO. 73
Career Development

Compare two games of the SAME GENRE - one you like, and one you don't - in the following ways: (Use separate sheet if needed)

1. Compare the contrasting styles of art between the two games (palette, textures, style etc.).

2. Compare the difference in gameplay between the two games (mechanics, glitches, how they function).

3. What makes each game fun or not fun? What parts magically make the game great?

D.A.T.A. Program - Applicant Evaluation #1

(To be completed by a **Teacher**)

Applicant Name: _____
Last (please print) First (please print)

School: _____

Scoring legend for each of the following categories: (3 = Excellent; 2 = Good; 1 = Satisfactory)	Student Score
1. Maturity	
2. Accuracy / ability to follow instructions	
3. Enthusiasm and interest	
4. Adaptable (adjusts to new situations)	
5. Follows through on assigned tasks	
6. Attendance	
7. Punctuality	
8. Shows motivation to learn new skills	
9. Ability to work independently	
10. Has positive attitude towards work	
11. Accepts constructive criticism	
12. Makes changes as a result of constructive criticism	
Total Score: (36 maximum)	

Evaluation completed by:

 Teacher (Print Name)

 Course Taught

 (Signature)

 (Date)

D.A.T.A. Program - Applicant Evaluation #2

(To be completed by an **Employer or Community Member**)

Applicant Name: _____
Last (please print) First (please print)

School: _____

Scoring legend for each of the following categories: (3 = Excellent; 2 = Good; 1 = Satisfactory)	Student Score
1. Maturity	
2. Accuracy / ability to follow instructions	
3. Enthusiasm and interest	
4. Adaptable (adjusts to new situations)	
5. Follows through on assigned tasks	
6. Attendance	
7. Punctuality	
8. Shows motivation to learn new skills	
9. Ability to work independently	
10. Has positive attitude towards work	
11. Accepts constructive criticism	
12. Makes changes as a result of constructive criticism	
Total Score: (36 maximum)	

Evaluation completed by:

 (Print Name)

 Relationship to Candidate

 (Signature)

 (Date)



SCHOOL DISTRICT NO. 73
(Kamloops-Thompson)

Student Education / Transition Plan

(To be completed yearly by TNT Coordinator and Student)



SCHOOL DISTRICT NO. 73
Career Development

Student Name: _____ Current Student Grade: _____

Home School: _____ Career Program: _____

Dates of Program: _____ Location of Program: _____

Grade 10 Courses:

Semester One	Semester Two

Grade 11 Courses:

Semester One	Semester Two

Grade 12 Courses:

Semester One	Semester Two

****TNT Coordinators - must use codes for program, not course name**

Student has a plan in place to meet Grad Requirements

Requirements
<input type="checkbox"/> 4 Credits Language Arts 10
<input type="checkbox"/> 4 Credits Math 10
<input type="checkbox"/> 4 Credits Social Studies 10
<input type="checkbox"/> 4 Credits Science 10
<input type="checkbox"/> 4 Credits Physical & Health Education 10
<input type="checkbox"/> 4 Credits Career Life Explorations
<input type="checkbox"/> 4 Credits Language Arts 11
<input type="checkbox"/> 4 Credits Social Studies 11 or 12
<input type="checkbox"/> 4 Credits Science 11 or 12
<input type="checkbox"/> 4 Credits Math 11 or 12
<input type="checkbox"/> 4 Credits Language Arts 12
<input type="checkbox"/> 16 Credits of other electives (10,11, or 12)
<input type="checkbox"/> 4 Credit Career Life Connections
<input type="checkbox"/> 4 of my elective Credits ADST or Arts Elective (10, 11, or 12)
<input type="checkbox"/> 8 Credits Gr 12 Electives
<input type="checkbox"/> Minimum 80 Credits

To be completed prior to program
<input type="checkbox"/> Literacy 10
<input type="checkbox"/> Numeracy 10
<input type="checkbox"/> Literacy 12
<input type="checkbox"/> Indigenous Focused Course

Student Signature

Date

Parent/Guardian Signature

Date

TNT Coordinator Signature

Date

Counsellor Signature

Date



SCHOOL DISTRICT NO. 73
(Kamloops - Thompson)

TNT Statement of Recommendation

(To be completed by TNT Coordinator)



Trades and Transitions
SCHOOL DISTRICT NO. 73
Career Development

Thank you for completing the TNT Statement of Recommendation regarding the student named below. The information on this reference will be used to determine candidates for the D.A.T.A. program. A quality response to the general comments section is also important.

Applicant Name: _____ School: _____

TNT Name: _____ Date: _____

TNT Signature: _____

	POOR TO EXCELLENT									
	1	2	3	4	5	6	7	8	9	10
Interest – Does the applicant demonstrate a keen interest in the trade? Comments:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Aptitude – Do their hobbies and interests reflect an ability to do hands-on work? Comments:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Learning and Study Skills – Is the student prepared for the homework load? Has the applicant demonstrated effective learning and study skills? Comments:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Maturity – Does the applicant demonstrate a level of maturity suitable for a post-secondary environment? Comments:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Initiative / Motivation Comments:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
General Comments:										

Score: Add 5 sections, divide by 5 = _____



SCHOOL DISTRICT NO. 73
(Kamloops-Thompson)

D.A.T.A. Program - Interview Notes

(To be completed by TNT Coordinator)



Trades and Transitions
SCHOOL DISTRICT NO. 73
Career Development

Please comment on each category.

Student Name: _____ **School:** _____

1. **Attendance (Unexcused Absences):** {0 = 10 days or more, 5 = 5 to 10 days, 10 = less than 5 days}

2. **Conduct (Administration's student file):** {0 = needs improvement, 5 = satisfactory, 10 = good}
➤ include last 2 years

3. **TNT Coordinator Statement of Recommendation:** {add 5 scores, divide by 5}

4. **Calculation for Grades based on the 8 most recently completed courses:**

Course Name	Course Grades
<i>Example:</i> English 10	86%
	1.
	2.
	3.
	4.
	5.
	6.
	7.
	8.
<i>{% average of the 8 courses / 100 x 10, round to 2 decimal places}</i> Score:	

5. **Evaluations (using Evaluation #1 and #2):** *{sum of both evaluations / 72 x 10, round to 2 decimal places}*

6. **Does this student have an IEP?** **Yes** **No**

If YES, please ensure TNT Coordinator discusses with the student and Learning Support Teacher.

TNT Coordinator Signature

D.A.T.A. Program - Applicant Profile

(To be completed by the TNT Coordinator/Counsellor **WITH** the Applicant)

	Maximum Score	Student Score
1. Attendance (Unexcused Absences): use <i>TNT Attendance Profile</i> Full days (0 = 10 days or more, 5 = 5 to 10 days, 10 = less than 5 days)	10	
2. Conduct (Administration's student file - past 24 months) (0 = needs improvement, 5 = satisfactory, 10 = good)	10	
3. TNT Statement of Recommendation	10	
4. Course Grades (Based Upon <u>Most Recent</u> 8 Completed Courses) (% average of last 2 complete semesters / number of courses)	10.00	
5. Evaluations (using Evaluation #1 and #2) (sum of both evaluations / 72 x 10, please round to 2 decimal places)	10.00	



School Requested Acceptance Conditions

(Confidential between school and district staff)

<input type="checkbox"/> Attendance	Comments:
<input type="checkbox"/> Behaviour	
<input type="checkbox"/> Other (Please describe in Comments box)	

TNT Coordinator/Career Counsellor Support

I **DO** / **DO NOT** (check one) recommend that _____
Applicant

be given consideration for placement into the D.A.T.A. Program at Valleyview Secondary School.

TNT Coordinator/Counsellor Name: _____

Signature: _____ Date: _____

School Support

I **DO** / **DO NOT** (check one) recommend that _____
Applicant

be given consideration for placement into the D.A.T.A. Program at Valleyview Secondary School.

Principal/Vice Principal Name: _____

Signature: _____ Date: _____