

Reference on Application for Admission to the HP FX Soccer Academy

Name of Applicant: _____

Educator (Teacher) ____ Coach (Club) ____

Please rank the applicant as follows:

1=Fair, 2=Good, 3=Very Good, 4=Excellent, 5=Outstanding X= Unable to Mark

Area	Rank	Remarks
Motivation and drive		
Ability to work with others		
Ability to work on own		
Ability to take direction		
Consideration of others		
Leadership ability		
Level of competitiveness		
Willingness to take information		
Overall athletic ability		
Can you envision this person being committed to physical training on a regular basis throughout the school year?		

Name of Referee (Print): _____

Name of Organization and Position: _____

E-mail: _____

Signature: _____

Date: _____

Please return to:

Attention: St. Francis Xavier Soccer Academy 9250-163st, Edmonton, Alberta.