

# WILLETTON SENIOR HIGH SCHOOL

## SPECIALISED BASKETBALL STUDIES



[willetton.shs.basketballprogram@education.wa.edu.au](mailto:willetton.shs.basketballprogram@education.wa.edu.au)

### SCHOOL CONFIDENTIAL REFERENCE FORM

STUDENT NAME	
REFEREE NAME / POSITION	
SCHOOL NAME	
DATE	

Please indicate the applicant's position in each criteria in each of the continua in consideration of the high athletic and educational expectations of this elite program. Please complete all the fields.

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Classroom	Behaviour		High
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Listening	Skills		High
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Classroom	Work Ethic		High
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Self	Responsibility		High
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Leadership	Qualities		High
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Work effectively	with others		High
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Ability to	stay on task		High
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Ability to	succeed under duress		High
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Low	Your	Recommendation		High

Does this student have any medical conditions, disabilities or learning difficulties that have been supported / accommodated by the school? If Yes, please specify.

- ❖ Add the Applicant's name to the file name.  
**example:** TRAVERS Emma - School Reference for 2025 Application
- ❖ Please return this completed application form to: [willetton.shs.basketballprogram@education.wa.edu.au](mailto:willetton.shs.basketballprogram@education.wa.edu.au)