

The Apollo Project Application Form

Atlas Academy in 2026

Current Year level (circle): 7 8

Student (applicant) Name: _____ Date of Birth: _____

Parent /Guardian / Carer Name/s: _____

Address: _____(number & street)
_____(suburb) _____(postcode)

Phone number: (home) _____(mobile) _____

E-mail address (Parent/Guardian): _____

Please attach COPIES of certificates and reports to this application. The application and attachments will NOT be returned to the student once the selection process is finalised.

Please return completed Applications to the Student Window for processing by Monday 12th October 2025.

Deputy Principal Student Engagement and Wellbeing will advise successful applicants by Monday 26th October 2025.

STEP 1. ACADEMIC ACHIEVEMENT

- ☐ I am a current Year 8 Atlas Academy student (attach a copy of your 2025 Semester 1 and Term 3 2025 School reports)
- ☐ I am a new Atlas applicant for Year (circle) 8 9

STEP 2.

- ☐ Attach a copy of your 2 most recent school reports (Semester 1 & Term 3 2025).
- ☐ Attach copies of any relevant certificates of performance achievement or competitions in which you have been involved (or list below).

STEP 3. CONDUCT

Please ask your Health and Physical Education teacher to complete the section below, indicating your level of conduct, work rate and potential to succeed in an extended learning environment for Health and Physical Education.

Teacher: _____

STEP 4. CAREER AND STUDY ASPIRATIONS

Please indicate why you would like to be in the Atlas Academy in 2026. Comment on your career aspirations.

STEP 5. PARENT COMMITMENT

Parent/s need to demonstrate support for your application to the Atlas Academy.

STEP 6. ADDITIONAL INFORMATION

If you wish the school to consider any additional information, please outline this information below or attach the appropriate supporting data.

STEP 7: Sporting Excellence Program

I would also like to be considered for the Sporting Excellence Program in 2026 YES ☐ NO ☐

STEP 8: CONFIRMATION

In submitting this form, I declare that the information supplied on this form and in the accompanying documents and statements is complete and correct to the best of my knowledge.

If any of the information is found to be false or misleading, I accept that Dalby State High School may cancel any offer that might be awarded to me on the basis of this application.

I understand that I will be expected to participate in both academic tasks and physicals tasks to the best of my ability in each and every HPE lesson.

Applicant Name: _____

Signature: _____ Date: _____

Parent/Guardian / Carer Name: _____

Signature: _____ Date: _____

Signature: _____ Date: _____

STATUS: _____

Dalby SHS HOD – Health and Physical Education

Signature: _____ Date: _____

Deputy Principal

Signature: _____ Date: _____