

Avondale College Testimonial Application - 2015

Name _____

Home room _____

Attended Avondale College from: _____

Reference No: _____

Please add any **School Activities, Leadership Activities and School Prizes** in the year level columns.

These must be verified by the Teacher in Charge.

These forms **must** be returned to your home room teacher or dean by **Friday 30 October, 2015**.

I would like to apply for a testimonial: signed _____

Year	School Activities	Verified by	Leadership Activities	Verified by	School Prizes	Verified by
Year 9 2011						
Year 10 2012						
Year 11 2013						
Year 12 2014						
Year 13 2015						

Teachers of the courses listed above will be asked to comment. Should you wish to have other teachers comment, please list them below:

Teacher Name	Code	Teacher Name	Code