



North Vancouver School District Peak Performance Program Coach/Instructor Verification Form 2011-2012

Student Name: _____

Area of Training: _____

Club/Organization or Program: _____

Coach/Instructor Name: _____

Address:

Street

Website

City

email

Postal Code

Business Telephone

- Will this student benefit from being enrolled in the Peak Performance Program and why?

- Please describe the student's current level of ability.
