Dear Parent/Caregiver

Application Process for Roleystone Academy of Digital Media

You are invited to apply for entry to the Roleystone Academy of Digital Media (RADM) Specialist Program in 2017. Applications are open to any student in Year 6 through to Year 8 from within and outside the Roleystone Community College catchment area, who have an interest in and special ability in the areas of Digital Media (Film).

RADM students are given the opportunity to be immersed in the art of Digital Media Production, developing skills and knowledge in areas such as Directing, Producing, Cinematography, Drama, Lighting, Sound Capture, Visual Effects, Journalism/Broadcast and Script Writing. Our four year course provides students with a variety of pathways on completion of year 10, most notable the attainment of a Certificate II in Creative Industries through our industry partners, Central Institute of Technology.

Our Award Winning Program is well supported and recognised by members of the International Film Industry, which at times allows students to have practical opportunities and experiences on working film sets and productions.

If you wish to be considered for the first round of selection please complete the attached Application form.

Criteria used for selection will be:

1) Student Report – Focussing on skills and attributes and evidence of a commitment to learning.
2) Reference from classroom teacher regarding attitude towards learning and work ethic in the classroom
3) Interview process- Students are given the opportunity to present a portfolio or work sample to show evidence of creativity in relation to the Digital Media learning area.

For enquiries regarding the program, please contact the College at filmtv@roleystonecc.wa.edu.au or by phoning myself on 08 9391 6222.

Mr Daniel Holliday
Daniel.holliday@education.wa.edu.au
Dean, Digital Media (Film)
Roleystone Academy of Digital Media
Digital Media (Film) ASP Program Application Form

1. Applicant Details

Full Name of Applicant

Date of Birth: ___/___/_______ Current School Year: 6 7 8

Name of a Parent or Guardian:

Address: __________________________________________________________

Suburb __________________________________________________________ Postcode _______________

Home Phone __________________________

Mobile Phone: __________________________

Email __________________________

2. Current School Details

Name of Current School: ____________________________________________

Name of School Principal: ____________________________________________

Name of Class Teacher: ______________________________________________

Address of Current School: ____________________________________________

Suburb: __________________________________________________________ Postcode: ______________

School Phone No.: _______________________________________________

Signature of Parent Guardian: _______________________________________

Date: ___/___/_______

Please ensure that you have enclosed a photocopy of your child’s most recent school report along with a reference from the student’s current teacher.

Please forward Applications to:

Mr Daniel Holliday
Dean, Digital Media (Film)
Roleystone Academy of Digital Media
Daniel.holliday@education.wa.edu.au