



DIAMOND BAR HIGH SCHOOL PEP PROGRAM

2018-2019

Cheer Team Tryout Packet

IMPORTANT DATES TO REMEMBER

DATE	TIME	ACTIVITY
April 13-April 21		Tryout Packets Available Online
Monday, April 30	12:30pm	Tryout Applications Due
Thursday, May 3	3:30 – 6:30pm Dance Room	Tryout Clinic; all tryout material learned, and mile run will be tested.
Friday, May 4	3:30pm Aerobics Room	Cheer & Song Tryouts
Saturday, May 5		2018-2019 Pep Squad Announced Posted on Pep DBHS Website
Monday, May 7	Lunch	New 2018-2019 Team lunch in Dance Room
Tuesday, May 8	4pm-8pm	Pieology Fundraiser and Team Dinner
Friday, May 11	2:00pm	Varsity Uniform Fitting; Dance Room

Tentative Summer Program Schedule

(tentatively 3x/week)

June 18-June 22

June 25-29

July 16-20, July 23

****Athletic Clearance must be on file prior to starting Summer Program****

Dead/Vacation Schedule:

(no practices)

June 1 – June 15

July 2-July 13

USA Song/Pom Camp of Champs

Knotts Berry Farm

July 24 – 27, 2018

Cost per participant: \$475

(includes most meals)

Pep Heck Weeks (time TBD)

July 30 – August 2

August 6 – August 9

Time TBD

All dates and times subject to change and/or cancellations based on funding and/or Coaches availability

Tryout Checklist

In order to participate in the Diamond Bar Pep Squad tryouts, each candidate must return the following documents **no later Monday, April 30 at 12:30pm.**

- DBHS Pep Squad completed application with current picture
- 2 Teacher evaluation forms
 - Current DHBS Students – one must be from GLC.
- DBHS Permission to Participate Form
- A copy of your Fall 2017 Grades & 2nd Semester 6-week (current DBHS students) or Grade Check (8th Grade students)
- \$10 Audition contribution (towards costs of clinic and judges)
- DBHS Pep Squad Rules and Policies (page 8 only) signed by both parent(s) and student.

What to Wear for Clinic and Tryouts:

- Black or Purple bottoms
- White or Black t-shirt or tank top (no bra straps)
- Tennis Shoes or Jazz Shoes
- Slicked pony tail or bun
- No bare midriffs, gum, or jewelry

Pep Squad Selection

Candidates are responsible for all material taught at tryout clinic. Candidates will perform in front of Pep Director and outside judges.

Squads will be determined by clinic attendance, attitude and behavior, grades, teacher recommendations, mile-run assessment, and skill level. Criteria may include, but not limited to: Cheer/Chant, Stunting and Tumbling, Dance Routine and Technique, Appearance, Knowledge of material, and showmanship.

Pep Director reserves the right to eliminate or combine teams based on the number of qualified candidates. Final selection of teams is at the discretion of the Pep Director.

Completed packets can be turned in to Kari Simonson in the Dance Room or DBHS Front Office no later than Monday, April 30. Late applications will NOT be accepted.

If you have any questions regarding the Tryout Packet, please direct them to Kari Simonson at ksimonson@wvusd.k12.ca.us

If you have any questions regarding the Tryout Packet, please direct them to Kari Simonson at ksimonson@wvusd.k12.ca.us

DIAMOND BAR HIGH SCHOOL PEP APPLICATION 2018-2019 CHEER TEAM

Name: _____

Student

Phone: _____

Student's Email: _____

Parent(s) Names: _____

Parent Cell Phone: _____

Parent(s) email: _____

Home Address: _____

Date of Birth: ____/____/____ GPA: _____

Grade you are in now: _____ DBHS GLC: _____

What squad are you trying out for?

Varsity Cheer Only _____ JV Cheer Only _____ Either Varsity or JV _____

TRAINING	# Years	Place of Training
Tumbling/Gymnastics		
Stunting Experience		
Hip Hop		
Pom/Cheerleading		
Other Styles		

Team/Group Experience	# Years	Name of Team/Company

PLACE PHOTO HERE

Candidate Name: _____

Do you have any known conflicts with the Pep Squad schedule? If so, please list below.

Please explain why you would like to be a member of the Pep Squad/Cheer Team at Diamond Bar High School? What character traits do you possess that will make you an asset to the team?



**DIAMOND BAR HIGH SCHOOL PEP PROGRAM
GRADE CHECK – 8th Graders Only**

Dear School Counselor,

_____ is trying out for the Diamond Bar High School Pep Program. At the conclusion of the most recent grading period, his/her GPA was _____. The number of absences he/she had during the most recent grading period was _____.

If you would like to add any additional comments, please do so below:

Thank you in advance for your assistance. Please return this form in a sealed envelope to the student or via district mail to Kari Simonson at DBHS.

DIAMOND BAR HIGH SCHOOL PEP PROGRAM
RECCOMENDATION FORM

Dear Faculty Member:

_____ is planning to try-out for the 2018-2019 DBHS **Pep Squad**. So that we can have a clear idea of your perception of this student's maturity and sense of commitment, please rate him/her on a scale of 1-4. Please add any comments that you feel might be appropriate for my knowing more about him/her. Thank you for your time.

*Please fill out this form and seal it in the provided envelope, then return it to the student trying out for Pep or place in my box in the front office. Please contact me with any concerns or issues at ksimonson@wvusd.k12.ca.us.

Current DBHS Students: *Your recommendation must come your GLC.*

<u>Scoring 1-4</u> 4-EXCELLENT 3-SATISFACTORY 2-NEEDS IMPROVEMENT 1-POOR
--

- | | | |
|--------------------------|-------|----------------------|
| 1. Positive Attitude | _____ | |
| 2. Cooperation | _____ | |
| 3. Work Ethic | _____ | |
| 4. Punctuality | _____ | |
| 5. Leadership skill | _____ | |
| 6. Integrity/Honesty | _____ | |
| 7. Initiative/Motivation | _____ | |
| 8. Dependability | _____ | |
| 9. Class work quality | _____ | (talking, attentive) |
| 10. Overall | _____ | |
| TOTAL: | _____ | |

You may comment on the reverse side regarding your recommendations and this candidate's qualifications. Thank you for your time and input!

Faculty Signature _____

Thank you for your assistance,

Kari Simonson
Pep Director
Diamond Bar High School

DIAMOND BAR HIGH SCHOOL PEP PROGRAM
RECCOMENDATION FORM

Dear Faculty Member:

_____ is planning to try-out for the 2018-2019 DBHS **Pep Squad**. So that we can have a clear idea of your perception of this student's maturity and sense of commitment, please rate him/her on a scale of 1-4. Please add any comments that you feel might be appropriate for my knowing more about him/her. Thank you for your time.

*Please fill out this form and seal it in the provided envelope, then return it to the student trying out for Pep or place in my box in the front office. Please contact me with any concerns or issues at ksimonson@wvusd.k12.ca.us.

Current DBHS Students: Your recommendation must come your GLC.

<u>Scoring 1-4</u> 4-EXCELLENT 3-SATISFACTORY 2-NEEDS IMPROVEMENT 1-POOR
--

- | | | |
|--------------------------|-------|----------------------|
| 1. Positive Attitude | _____ | |
| 2. Cooperation | _____ | |
| 3. Work Ethic | _____ | |
| 4. Punctuality | _____ | |
| 5. Leadership skill | _____ | |
| 6. Integrity/Honesty | _____ | |
| 7. Initiative/Motivation | _____ | |
| 8. Dependability | _____ | |
| 9. Class work quality | _____ | (talking, attentive) |
| 10. Overall | _____ | |
| TOTAL: | _____ | |

You may comment on the reverse side regarding your recommendations and this candidate's qualifications. Thank you for your time and input!

Faculty Signature _____

Thank you for your assistance,

Kari Simonson
Pep Director
Diamond Bar High School

Parent Permission to Participate:

Dear Parents,

The opportunity to join the **Diamond Bar Pep Program** grows more competitive every year; **therefore, we cannot guarantee a place on the team even though they have been on the team previously.** Talent alone will not determine who makes the Company. **The Pep Program is searching for students who can represent Diamond Bar High School as excellent members and superior role models for the student body.** Pep Members must prioritize their activities prior to trying out.

The Diamond Bar High Pep Program is an athletic CIF activity. It is therefore, **highly competitive** and the overall commitment expected from both parents and students is tremendous. In order to reach the goals of the Pep program, it is imperative that all candidates understand exactly what they are committing to.

If both parent and student agree to the following terms, please sign (both parents where applicable) along with your student and return the permission form with the completed packet no later than **Monday, April 30.**

1. We have reviewed our student's academic performance.
2. We have read the guidelines for the Pep Program tryouts and have discussed its implications with our student.
3. Our student has no health problems that would be aggravated by participation in Pep activities.
4. We acknowledge, accept, and understand that Pep is a non-for-profit program and fundraisers and donations are helpful in order to fund this high-quality program.
5. We consent to having our student tryout for the 2018-2019 Diamond Bar Pep Program and will help him/her fulfill their responsibilities in every way.
6. We understand the time commitment required for our student to participate in Pep and that participation is required for all events.
7. We have read the Pep Program Rules and Policies Handbook and will adhere to it fully if chosen as a member of 2018-2019 DBHS Pep Program.
8. We also understand that all decisions of the judges at tryouts are final. If we do not see our student's number, we will know that our student did not make the program.
9. We understand that if our student is selected this year, he/she will have to tryout again next year and their position on the squad is not guaranteed. Improvement, talent, and attitude play a part in whether they return.

Parent Name: _____

Parent Signature: _____ **Date:** _____

I have read the enclosed information and understand that being a member of the Diamond Bar Pep Program requires a major time commitment. I am aware that rehearsals begin in the summer and continue throughout the year. I understand that Pep will need my active support of the program through fundraisers and donations in order to maintain a high-quality program and if donation and/or fundraising goals are not met than the opportunities offered to students will need to be reduced.

Student Name: _____

Student Signature: _____ **Date:** _____