



Sports Grant Aid Coach & Leader Development Fund

Nottingham City Sport & Leisure Services



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Nottingham
City Council

GRANT APPLICATION FORM

COACH AND LEADER DEVELOPMENT FUND

CL

Q1 Personal details:

Name: _____

Address: _____

Postcode: _____

Tel. No: _____ Mobile: _____

Age: _____ DOB: _____ Male Female

Email: _____

Q2 Do you belong to an organised City based sports club or community group?

Yes (If yes, please give details) No (If no, please go to Q3)

Club/Organisation Name: _____

Venue of club base and address: _____

Contact person for verification purposes:

Name: _____

Role/position: _____

Tel. No: _____

Website or Email: _____
(if available)

Q3 Detail your active involvement with Sport and Leisure providers in Nottingham City: (e.g. Sports Development, Sports Clubs) if any.

Please provide a contact name and telephone number to verify this information:

Contact name: _____ Tel. No: _____

Q4 Present coaching/leadership activity:

Please list the main coaching and/or leadership activities you are currently involved with in the City of Nottingham:

Dates	Position eg: Assistant Coach	Club/Venue	Age Group(s) coaching

Is your coaching/leading on a: Paid basis Voluntary basis Both

How many hours per month on average? (during the season) _____

Q5 Current sports coaching/leadership qualifications:(if any)

Please give details below:

Awarding Body	Course/qualification	Date awarded
<i>eg. Sports Leaders UK</i>	<i>Level 1 in Community Sports Leadership</i>	<i>Dec 2004</i>

Please provide information about which course(s) you are planning to attend and the amount of funding required:

Course Title	Awarding Body	Start Date	Total Course Cost	Grant Requested (Max 50%)
1. eg. Level 1 in Football Coaching	F.A.	14/6/05	£ 60.00	£ 30.00
2.			£	£
3.			£	£
4.			£	£
TOTAL			£	£

Why do you want to attend the course you are applying for?

How will attending the course be of benefit to sport/physical activity provision within Nottingham City?

Q7 Have you made, or intend to make any other applications for financial support for the courses you are applying for?

Yes (If Yes, please give details) No (if No, please go to Q8)

Name of Grant Giving Organisation	Date Grant Requested	Date Grant Received	Amount requested	Amount received

Payment of Grant:

If your application is successful the cheque **must** be payable to either: Course Provider, Applicant or Club. Please tick your preferred choice.

Course provider _____ Print full organisation name

Applicant _____ Print full name

Club/Group _____ Print full club/group name

Declaration:

I, the undersigned, undertake that any grant awarded will be used solely for the purpose outlined in this application. I also understand that Nottingham City Council reserves the right to withhold the payment of the whole or any part of a grant or to require repayment of any grant if the information is subsequently discovered to be false.

Signature: _____

Print Name: _____

Date: _____

Please complete the following section:

Please indicate your ethnic origin (*please tick one box only*)

- White Irish Black African Black Caribbean
 Indian Pakistani Bangladeshi Kashmiri Chinese
 Black other (please specify) Other (please specify)

Do you consider yourself to have a disability yes no

CHECKLIST FOR COACH & LEADER DEVELOPMENT FUND APPLICATION

Please tick to confirm:



Have you read the guidance on applying for Coach and Leader Development fund?

Have you completed, in full, all relevant sections of the application form?

Have you told your sports club/community organisation that you are applying for this grant?

Have you told us all of the courses you are planning to attend and how much funding support you are applying for?

Have you signed and dated the application form

