



**UKCC FUNDING APPLICATION**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Essex Met Netball wishes to support their affiliated members by providing UKCC course subsidies and mentoring opportunities to help develop coaches across the county. | | | | | | | | | |
|  | | | | |  |  | |  |  |
| **Contact Details** | | | | |  |  | |  |  |
|  | | | | |  |  | |  |  |
| Surname |  | First Name | | |  | Affiliation No. | |  | Club |
|  | | | | |  |  | |  |  |
| Address: | | |  |  |  | Daytime telephone:  Evening telephone:  Mobile telephone: | | | |
|  | | | | |  |
|  |
| Postcode: | | | | |  | Email address: |  | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | | | | |
| ***Coaching Details*** |  |  |  | |  | | |  | | |  |  | |  |
| What is your current qualification? | | | | | |  | | | | | |  | |  |
| *(Qualifications held & date achieved)* | | | | | |  | | | | | |  | |  |
|  | | | | | |  | | | | | |  | |  |
| Details of coaching currently being delivered | | | | | |  | | | | | |  | |  |
| *Where are you coaching (School, Club, Academy)?* | | | | | |  | | | | | |  | |  |
| *How many hours per week? etc* | | | | | |  | | | | | |  | |  |
|  | | | | | |  | | | | | |  | |  |
| Which UKCC Level and course are you applying for? | | | | | |  | | | | | |  | |  |
| *(Location, date, including date of completion)* | | | | | |  | | | | | |  | |  |
| What is the cost of this course? | | | | | |  | | | | | |  | |  |
| Please outline any contributions being made by your | | | | | |  | | | | | |  | |  |
| club, school or any other partner? | | | | | | | | |  |  | |  | |  |
|  | | | | | | | | |  |  | |  | |  |
| Are you interested in assisting Essex Met in their delivery, eg, working in a school, a club, in the Essex Met Netball | | | | | | | | | | | | |  |  |
| academies or coaching programmes? | | | | | | | Yes x No | | | | |  | |  |
|  | | | | | |  | | | | | |  | |  |
| *If yes, please detail your preferences* | | | |  | | | | | | | |  | |  |
|  | | | | | | | | | | | | | | |

|  |
| --- |
| TERMS & CONDITIONS |
| * Essex Met Netball affiliated members are eligible to apply and must send a **SIGNED** copy of the application form as directed. * Priority will ultimately be given to applicants where the training will have a wider impact than on just the coach, and can contribute to the overall development of Netball in Essex Met. * Awards are likely to be for 25% or 50% of the cost, therefore applications which can identify other sources of funding are encouraged * Applications will be considered by a panel and applicants will be notified in writing within a month. * If awarded the grant, a cheque will be sent on completion of the course (except for level three) upon receiving proof of the award certificate. Recipients are asked to send confirmation of their award certificate. Cheques will be made to individuals not clubs. * This scheme is subject to funding and reviewed annually |

|  |  |  |  |
| --- | --- | --- | --- |
| **AGREEMENT** | | | |
| ***I certify that I will undertake the acknowledgements set out below:***  **1.** The applicant has read, understood and will comply with the guidelines and criteria set out for the Essex Met Netball Grant Scheme.  **2.** All information provided in this application and all information in any supporting documentation is truthful and accurate. The applicant has made full and complete disclosure of all relevant facts relating to the application.  **3.** The applicant undertakes that any grant provided would be used for exactly the purpose set out in this application and for which an award is made. | | | |
| **Signature x** |  | **Print Name x** |  |
| **Date x** |  |
| **Bank details**  **for payment** | **Account Name:**  **Sort Code: Account No:** | | |
| **When this form is completed and signed please send to:**  **Bisi Owolabi, Essex Met Netball UKCC Grant Scheme, Please email**  **to : development@essexmet.co.uk** | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| For Office Use | | | | | | | | | | | |
| Received on |  | **Reviewed on** |  | | | **Sent to** |  | **Funding issued on** | |  | |
|  | | | | **Yes** | **No** |  | | | **Yes** | | **No** |
| Is the coach involved in Essex Met Netball Academies? | | | |  |  | Grant approved? | | |  | |  |
| Is the applicant able to assist Essex Met Netball with delivery? | | | |  |  | Amount of grant | | | **£** | | |
| Does the applicant have other sources of funding? | | | |  |  |  | | |  | |  |
| Does the applicant belong to a CAPS accredited club? | | | |  |  |  | | |  | |  |
| Signed | | | | Print Name Date | | | | | | | |