



National Federation	
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Contact Details

Name	
Email	
Telephone	
Address for Correspondence	

Participant Information:

Surname(s)				First Name(s)	
Date of Birth		Age		Nationality	
Marital Status	Single / Married	Sex	M / F	Title	Mr / Mrs / Ms / Other
Address for Correspondence				Telephone	
				Fax	
				E-mail	

Additional technical information:

Number of training years	
Average no. of training sessions/week	
Test/Monitoring results (If any)	
Technical comments	



Personal best results:

Date	Place	Event	Result

Season best results:

Date	Place	Event	Result

Language(s):

Language (s)	Speaking	Writing	Reading
	1 / 2 / 3 / 4 / 5	1 / 2 / 3 / 4 / 5	1 / 2 / 3 / 4 / 5
	1 / 2 / 3 / 4 / 5	1 / 2 / 3 / 4 / 5	1 / 2 / 3 / 4 / 5
	1 / 2 / 3 / 4 / 5	1 / 2 / 3 / 4 / 5	1 / 2 / 3 / 4 / 5

Please circle the appropriate figure (1 = beginner / 5 = fluent)



Coach information:

Surname(s)				First Name(s)	
Date of Birth		Age		Nationality	
Marital Status	Single / Married	Sex	M / F	Title	Mr / Mrs / Ms / Other
Address for Correspondence				Telephone	
				Fax	
				E-mail	
Technical information					

Scholarship project:

Preferred option for training*	NF Training Option	<input type="checkbox"/>
	FINA Training Centre Option	<input type="checkbox"/>

**Please refer to the FINA Scholarship Programme Guidelines*

Length of course	Start date (dd/mm/yyyy)		End date (dd/mm/yyyy)	
	Total duration (months)			

Qualification event expected (if any)	Date		Location	
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Attachments:

The following documents must be enclosed with this form (originals or copies)	Enclosed
Reference letter from the coach/training centre	<input type="checkbox"/>
CV of the candidate	<input type="checkbox"/>
Cover letter from the candidate	<input type="checkbox"/>
Detailed description of the training course expected	<input type="checkbox"/>

Note: To receive full consideration, each application must be accompanied by all required documents and sent to FINA **at least 2 months before the start of the training programme.**



DEVELOPMENT
PROGRAMME

**FINA DEVELOPMENT PROGRAMME
FINA SCHOLARSHIPS FOR ATHLETES**

Application Form

Name of National Federation:

I, the undersigned, President / Secretary General of the above-mentioned National Federation, certify that the information provided on this form is accurate and true, and I support the below-mentioned athlete's application for a FINA Scholarship for Athletes.

(Name, Title and Signature)

(Date)

STAMP

The candidate for a FINA Scholarship for Athletes:

I, the undersigned, ATHLETE certify that the information provided on this form is accurate and true. I commit to follow the requested course diligently and subsequently, to use the experience I have acquired to promote sport in my home country.

(Name, Title and Signature)

(Date)

**PLEASE RETURN THIS COMPLETED FORM TO THE FINA OFFICE IN
LAUSANNE (SWITZERLAND) BY FAX (41-21) 312 6610 OR BY EMAIL:
development@fina.org**

