

# ELITE TRAINING GRANT/ INDIVIDUAL ATHLETES SUPPORT SCHEME/ SPORTS AID GRANT

### Application Form 2024-2025

The information you provide in this application form is the basis for assessing eligibility for support under the Elite Training Grant (ETG)/Individual Athletes Support Scheme (IASS)/Sports Aid Grant (SAG). The Application Guidelines should be read in conjunction with the explanatory notes when completing this application form. Application form and Guidelines can be downloaded from the HKSI website (<a href="https://www.hksi.org.hk">www.hksi.org.hk</a>).

The personal data provided will only be used by the HKSI for purposes relating to this application. Only persons duly authorized by the HKSI will be given access to your personal data. For correction of or access to the personal data you have submitted, please contact the staff of the High Performance Administration Department.

Please submit the completed form to High Performance Administration Department, Hong Kong Sports Institute, 25 Yuen Wo Road, Shatin, Hong Kong on or before <u>13 November 2023</u>. Performance attained between 13 November and 31 December 2023 should be reported on or before 5 January 2024, if any. Applications with performance attained between 13 November and 31 December 2023 will also be accepted before 5 January 2024. **Late or incomplete applications will NOT be considered.** 

PART	PART A (To be completed by the applicant) (Please type or print)					
1.		ividual Athletes Support				
	$\square *S_{\mathfrak{l}}$	oorts Aid Grant <sup>3</sup> / Sports	Aid Grant	(Team Only Sports)		
2.	Personal Particulars	Sport:		☐ Full Time Training ☐	Part Time Training	
	Name: (English) (Surname	)	(Ot	her Name)		
	(as per yo	ur HK ID Card/Passport	.)			
	Name: (Chinese)			Gender: * Male / Female	Age:	
	Date of birth: (dd)	(mm)	(yyyy)	Place of birth:		
	Nationality:			Hong Kong ID No.:		
	Residence in HK since:	(dd) (mm)	(уууу)	Occupation:	(*Full/Part Time)	
	School (if you are currently	studying) :	g 1 1 / g	econdary School / Post-Secor		
	Postal address:	(*Primary S	School / S	econdary School / Post-Secor	ndary Institute)	
	Day-time contact tel. no.:					
	Email address:					
	Emergency Contact Person	:		Telephone Number :		
	Squad: Hong Kong Nationa	l * Senior/Elite/Junior m	nember	Position in Team:	G – Team Only Sports)	
	* Delete as inappropriate			(For applicants of SA)	o – Team Omy spons)	

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- Remarks: 1. Athletes of Tier A sports and sports supported under the IASS can apply for ETG.
  - 2. Athletes of Olympic or Asian Games Sports, who are not supported under Tier A sports but meet the specified funding criteria can apply for IASS (who will receive ETG and a programme grant).
  - 3. Athletes of other sports which are not supported under Tier A sports or IASS can apply for SAG.

3.	Grant received in 2023-2024 (please put "√" in the box)					
	Scheme:	<b>ETG</b>	☐ IASS	SAG	□ No	
	Category:	* Elite A+ / Elite A / I Elite B / Elite C / Se Junior A / Junior B / Secondary Student A Secondary Student A Secondary Student A	nior Squad / / Junior Squad Athlete A / Athlete B	* Elite A / Elite B / Eli Junior A / Junior B Elite A (Team) / Elit Junior A (Team) / Ju	e B (Team) / Elite C (Team)	
	* Delete as inapprop	priate				
4.	Records of Achiev	rements				
	*Applicants w (January to Do Results achieve Support all you	who are grant recipients in ecember 2023), if any.  Ed after December 2023 will	n 2023-2024 (refer to above l be considered for support in nentation (e.g. official results,	e point 3) only need to provide 2025-2026.	in the period between January 2022 to December 2023*.  information on your results achieved in the year of 2023	

#### A. <u>Individual Results</u>

Date (dd/mm/yyyy)	Name of Competition / Venue (Please provide both English and Chinese versions for data input)	Event (e.g. 100m, singles, etc.) (Please provide both English and Chinese versions for data input)	Results/ Position (e.g. score, timing, distance in metre, etc.)	No. of Entries for your Event	No. of Competing Countries/Regions for your Event	Personal Best for this Event

#### *B.* 1. <u>Team Results</u> (The applicant as a member of the team)

Date (dd/mm/yyyy)	Name of Competition / Venue (Please provide both English and Chinese versions for data input)	Results/ Position  (e.g. score, timing, distance in metre, etc.)	No. of Entries for your Event	No. of Competing Countries/Regions for your Event	Name(s) of Team Member(s) (Please provide both English and Chinese versions for data input)

#### 2. <u>Individual Award Honoured in Major Competition</u> (Refer to special consideration for support to Team Sports/Events)

Date (dd/mm/yyyy)	Name of Competition/Venue (Please provide both English and Chinese versions for data input)	Award (Please provide both English and Chinese versions for data input)

	Federation.	and be supported by officially publis.	hed/endorsed ranking lists of Asian/International
	2022:	(Asian)	(World)
	2023:	(Asian)	(World)
5.	~ -	rogramme for 2024-2025 (To be agreed that evenue, frequency, duration, mon	
6.		n plan for 2024-2025 (To be agreed tate name of competition, date, place	
7.	•	petitions and goals in the next 4 year ide both English and Chinese version	ars (To be agreed by your Coaching Supervisor) as)
8.	Declar	ation	
	that no	n-conformity with the submitted train	ed in this application is true and correct. I understand ning and competition plan [as listed in (5) and (6)] for or breach of terms in the Agreement might result in or in part of the payment.
	Signat	are of applicant:	Date:

*C*.

**Ranking** 

### PART B To be completed by the NSA applying for SAG "Team Only Sports" Grant

1.	Justification for Nomination
2.	Selection Criteria for Nominated Athlete(s)
3.	Selection Procedure for Nominated Athlete(s)
4.	Development Plan for the Athlete(s) to Achieve Excellence
5.	Budget for the Proposed Training/Support Programme (Please list budget breakdown and amount required in Hong Kong dollars)

PART C Parental/Guardian Consent (For applicants under 18 years old) (To be completed by parent/guardian)						
I consent to my child/ward,						
Signature of parent/guardian:						
Name in BLOCK letters:	Relationship:					
Address (if different from applicant):						
D	Pay-time contact tel. no.:					
PART D Recommendation of the C	Coaching Supervisor					
Name of Coaching Supervisor: (English) (Surname	e) (Other name)					
(Chinese)	(*Mr/Ms/Miss)					
Address:						
Email address :	Day-time contact tel. no.:					
Coaching Qualification:						
Position at National Sports Association:						
Please provide comments on the applicant in the	e following areas with grading:					
(5 - Excellent, 4 - Good, 3 - Satisfactory, 2 – Fair,	1 – Poor) 5 4 3 2 1					
(i) Commitment to training and competitions						
(ii) Potential for further advancement						
(iii) Consistent level of performance						
(iv) Contribution to team work						
Other Comments/Recommendations:  (if any)						
Signature:	Date:					

<sup>\*</sup> Delete as inappropriate

## PART E Endorsement by the National Sports Association (NSA) (To be endorsed and signed by a senior official e.g. President, Chairman, Hon Secretary of the NSA)

Name of Association	:			
Name of Responsible	e Person: (English) (Surname)	(Other name)		
	(Chinese)	(*Mr/Ms/Mis	ss)	
Position at NSA: _				
Tel. no	Email address:			
	* *	* * *		
1. Comments/Recor	nmendations on the applicant:			
-				
3. I *endorse/do n	ot endorse the appointment of		as the coaching	
supervisor of th	е аррисані.	(Name of coach)		
Signature of Official	:			
Name (English)	: (Surname)	(Other name)		
(Chinese)	:	(*Mr/Ms/Mis	ss)	
Position at NSA :				
Tel. no	Email address:		_	
Date :		Association's Chop:		

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\* Delete as inappropriate