

Coach Recognition Application Form email completed form to: coaching@ascta.com

Name:		SCTA #:	
Address:		State/Post Code:	
Ph (Home):		Ph (Mobile)	
Email:		DOB:	
Club:		Applying for (circle):	Bronze Silver Gold Platinum
Prerequisite: Current financial SCTA member (circle)		Y / N	

Coach Achievement Requirement:

Name of event (PD and/or meet)	Date of event	Verified by (name)	Verified by (signature)
<i>e.g. SCTA NSW State Conference</i>	<i>28-30 September 2018</i>	<i>SCTA Branch President</i>	<i>S. President</i>

Athlete requirements:

Criteria (e.g. 1b)	Swimmer	Age	Club	Comp	Event	Year	Time swum	QT	Place	Swimmer/parent contact (email/ph)	Verified by (SCTA use)
<i>e.g. 4a</i>	<i>Jude Speedy</i>	<i>15</i>	<i>Splash WA</i>	<i>Nat age</i>	<i>100fr</i>	<i>2018</i>	<i>56.7</i>	<i>57.1</i>	<i>2nd</i>	<i>Nigel Speedy</i>	<i>Simone Special</i>

* Please supply evidence of the competition, event, time and place for each swimmer.

SPORT INTEGRITY DISCLOSURE QUESTIONS

<p>1. Have you previously been charged or convicted of any offence (criminal or otherwise) or accused of any offence corresponding to a violation of any sport governing bodies' rules and regulations, including notably the Swimming Australia Constitution, Rules and Regulations, or Code? <input type="checkbox"/> No <input type="checkbox"/> Yes (please specify below)</p>
<p>2. Has any sporting governing body ever imposed any disciplinary or sanction against you for any action which may amount to a violation in terms of any sport governing bodies' rules and regulations, including notably the Swimming Australia Constitution, Rules and Regulations, or Code? <input type="checkbox"/> No <input type="checkbox"/> Yes (please specify below)</p>
<p>3. Have you ever been charged with, convicted of or subject to any pending civil, criminal, administrative or disciplinary proceedings including violation of any Financial or Governance Provisions, which may have an effect on your presently applying for a position within the Swimming Australia structure? <input type="checkbox"/> No <input type="checkbox"/> Yes (please specify below)</p>
<p>4. Have you ever been accused of, involved in, or charged with or convicted of any inappropriate behaviour specifically relating to sexual harassment, sexual misconduct, or the violation of any Child Protection Administrative Act, or any other inappropriate behaviour? <input type="checkbox"/> No <input type="checkbox"/> Yes (please specify below)</p>
<p>5. Have you ever been informed of any such inappropriate behaviour as referred to in clauses 3 and 4 above, and if so what action was taken by you, and was it ever reported, and if so to whom? <input type="checkbox"/> No <input type="checkbox"/> Yes (please specify below)</p>

SCTA use: Received: ___/___/___ Processed: ___/___/___ By: _____ Recommend: Approve/Decline Result: Approved/Declined Applicant notified ___/___/___