

# 2008 Lord's Taverners Scholarships for Young Athletes with a Disability

**Information and Application Form** 







#### Introduction

The Lord's Taverners Australia, ACT Branch Scholarship Scheme for young aspiring athletes with a disability provides funding to such athletes who are residents of the ACT and its region who are registered with an ACT sporting organisation. It is designed to help them achieve their long term sporting goals.

A total funding of \$5000 will be available annually over the next three years. The number and value of individual scholarships will depend on the number and cost of proposals but the scheme will be flexibly managed to maximize participation.

### **Important Dates**

The scholarship period is 12 months, from 1 January to 31 December 2008. The timeline for the election process is outlined below:

Closing date for applications
Friday 16 November

 Assessment of applications and Short listed applicant interviews

November 2007

Announcement of successful applicants

December 2007

Who is eligible for assistance?

- Scholarships are available for athletes who are currently residents of the Australian Capital Territory and its region who have a disability and are registered with an ACT Sporting Organisation.
- · All disabilities are eligible for assistance
- Athletes must be in the age group 12 20 years

#### Selection Criteria

The following selection criteria will be used to assess each application on relative merit. Please note that the criteria should not be viewed in isolation, as <u>all</u> selection guidelines will be considered.

- 1. If you are currently competing in sporting events
  - · You must have clear achievement goals for the next year.
- 2. If you are not currently competing in sporting events
  - You must have clear competition plans for the next year
- 3. If you are receiving current funding assistance to participate in sport
  - You must be prepared to provide all details
- Successful applicants must agree to abide by the conditions of the scholarship which include attendance at designated functions and meetings and provide a written report with details on how they have spent the money

#### **Further Information**

For further information about the Lord's Taverners Scholarships for Young Athletes with a Disability, please contact:

**Donna Nicholls** 

**ACTSPORT** 

**Coordinator-Disability Sport Education Program** 

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OFFICE USE ONLY
Date Received:
Received by:



Section 1 - Personal Details

First Name:

Date of Birth:

Question 1

# 2008 Lord's Taverners Scholarships for Young Athletes with a Disability -Application Form-

#### **CLOSING DATE FOR APPLICATIONS: Friday 16 November 2007**

Age:

Surname

Sex: Male / Female

Current Address:	•	·	
	State:	Post Code:	
Telephone: (H)	(W)	(Mob)	
Email address:			
Please answer all question the relevant information.	ns by circling the approp	oriate answer or by provid	ling
Section 2 - Your Disabili	ty		
Question 1 In your own words, what is Place answer here:	your disability?		
Question 2 Do you have medical certif  If yes, please give details h	·	? Yes No	)
Section 3 – Eligibility and	d General Information		

Are you an Austral	ian Citizen?	Yes	N	О	
Question 2 Are you registered	with an ACT Spo	orting Organisatio	n? ነ	⁄es	No
Question 3 In what sport are y	ou applying for th	nis scholarship:			
Place answer here	:				
Question 4 Have you ever held Place details here,	-	-	ner orgar	nisation?	
Sports Coach Det	tails (if vou have	e one)			
First name:	Surna	•			
Current Address:					
	State:			Post Cod	le:
Telephone: (H)	(1)	<b>W</b> )	(Mob)		
Email Address:					

# Your Funding Goals For 2008

If you were to be successful in your application for a scholarship, how would you use the funding during 2008?

Please state in your own words below:				
Declaration				
I wish to be considered for a Lord's Taverners Scholarship, and declare that all the information submitted on this application form is correct and complete. I understand that Lords Taverners reserves the right to vary or reverse any decision regarding the scholarship made on the basis of incorrect or incomplete information.				
Signature of Applicant:	Date:			
Applicants Under 18 years of Age				
For applicants under 18 years of age, the parent, guardian or custodian who is the first legal point of contact must sign below.				
Name:				
Address:				
	State:	Post Code:		
Relationship to Applicant:	1			
Signature:		Date:		
		•		

ACT Sporting Organisation Support

This section needs to be completed by an official of the organisation that administers the sport you are applying for funding to support

Name of Organisation:				
Organisation Contact:				
Title:				
Phone (BH):	Phone (AH):		Fax:	
Name of Applicant:				
Comments in Support of A	pplicant:			
No. of Annihadian constraints	.l.l. (l	Г		
No. of Applications receive organisation	d by the			
This Applicant is ranked:				
Eg. – If there are five appli 1 = most supported and 5 supported				
I certify that all information in this application and in any attachments are to my knowledge true and correct in every detail.				
Signature:			Date:	
Please submit signed appl <b>2007</b>	ication forms t	o ACTSPORT	by <b>Friday 16 Nove</b> m	ıber
Donna Nicholls				
ACTSPORT 100 Maitland Street				
HACKETT ACT 2602				
Phone: 6257 9977				