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**LGFA Club-School Link Application for Recognition**

*This is the Formal Application of Recognition for the delivery of the LGFA Club-School Link programme in our community.*

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| **Year of Application** |  |
| **Club Name** |  |
| **School Name** |  |
| **County** |  |

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| **We are seeking recognition for the delivery of the programme at level:**  *(Please Place an X beside your desired award)* | | | | | |
| **Bronze** |  | **Silver** |  | **Gold** |  |

**Our Delivery Team**

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|  | **Club Delivery Team** | **School Delivery Team** |
| **Club/School Link Coordinator Name** |  |  |
| **Club/School Link Coordinator Contact Email** |  |  |
| **Please list any other club and/or school personnel involved in the delivery of the programme** | | |
| **Name** |  |  |
| **Role** |  |  |
| **Name** |  |  |
| **Role** |  |  |
| **Name** |  |  |
| **Role** |  |  |
| **Name** |  |  |
| **Role** |  |  |

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| **Please provide brief details on all communications between the club and the school throughout the year:** |
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| **Provide details on how your Club-School Link has met minimum requirements to receive recognition applied for** | |
| **Club Requirements** |  |
| **School Requirements** |  |

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| **Please provide details of regular or irregular coaching opportunities on the school site provided by club coaches (Only Applicable to Silver or Gold Award Applications)** |
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| **Please list any additional agreed actions to delivered as part of the Club – School Link Programme** | |
| **Club** |  |
| **School** |  |

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| **Please provide full details of your review at the end of agreed period of the activity including monitoring and evaluation** |
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| We hereby declare that the information provided is true and correct. We also understand that any willful dishonesty may render this application to be refused. | | | |
| **Club Signature** |  | **School Signature** |  |
| **Date** |  | **Date** |  |
| *Please supply a signed copy of the partnership agreement between Club and School if not already submitted.* | | | |