**CARLOW SPORTS AMBASSADOR AWARD**

**ELITE ATHLETE SUPPORT BURSARY PRESENTED BY CARLOW COUNTY COUNCIL & COUNTY CARLOW LOCAL SPORTS PARTNERSHIP**

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**APPLICATION FORM**

**Please Note: Closing date for applications is Friday 13th Nov 2015. Please return forms via email to** **mjduggan@carlowcoco.ie** **or post to: Martha Jane Duggan, Community Department, Carlow County Council, Athy Road, Carlow. Applications will be assessed by a sub-committee of Carlow County Council. Please fill out each section of the application form in full and add an appendix/attachment if necessary. Teams can apply and must have team endorsement from the relevant NGB. This bursary is not open to professional athletes.**

|  |  |
| --- | --- |
| **Name:** |  |
| **Sport:** |  |

1. **PERSONAL DETAILS**

**Please indicate where you would like your mail sent to:** (Tick one)

 Home / Permanent Address [ ]

 Term Address if at college [ ]

|  |
| --- |
| **Age & Date of Birth:** |
| **Home Ph:** | **Mobile Ph:** |
| **Email:**  |
| **Home / Permanent Address:** | **Term Address (If applicable):** |
| **Street:** | **Street:** |
| **County:** | **County:** |
| **City:** | **City:** |

**2. SPORT DETAILS AND SUPPORT PROGRAMME REQUIREMENTS**

|  |
| --- |
| **List your highest achievements** |
| **Highest Achievements** | **Event** | **Year** | **Placing** |
| **1.** |  |  |  |
| **2.** |  |  |  |
| **3.** |  |  |  |
| **Have you previously received support from Carlow County Council/Carlow Local Sports Partnership in relation to elite sports performance?** | **Yes/No** | Year | Amount |
| **With your commitments are you in a position to meet the conditions attached to the bursary:** |
| Attend at least 4 County Council / County Carlow LSP events from Jan 2016 to Dec 2016. |  |
| Use profile and image to promote sports participation in the County as an ‘Ambassador’ for participation in sport from Jan 2016 to Dec 2016 |  |
| Update committee on progress periodically from Jan 2016 to Dec 2016 |  |

**3. ACADEMIC DETAILS**

|  |
| --- |
| Name of Institution you are intending to or currently attending at i.e. school / college: |
| Student ID (If known / you have one):  | Location: |
| Course name:  |

**4. PERSONAL BIOGRAPHY**

Please supply a personal/team profile piece using the headings below as a guide. Carlow County Council in collaboration with County Carlow Local Sports Partnership (CCLSP) will use this information to promote the award. Add additional sheets if necessary.

|  |  |
| --- | --- |
| **Academic Goals** |  |
| **Sporting Achievements** |  |
| **Sporting Goals** |  |
| **Sponsors (if any)** |  |

**5. PERSONAL STATEMENT**

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| --- |
| **Please write in the box below:** **(a.) Why this type of support would benefit you, including a breakdown of proposed expenditure; and** **(b.) The type of commitment you are willing to give to act as an ambassador for Carlow County Council and County Carlow Local Sports Partnership; and** **(c.) Also please detail any grants you are currently in receipt of.** **Maximum 500 words.** |
|  |

**6. BURSARY TERMS & CONDITIONS**

1. **The table below outlines the scoring system used to assess the application:**

|  |  |
| --- | --- |
| **Criteria** | **Weighting /Max Score** |
| Current level of participation | 20 |
| Future sporting potential | 30 |
| Endorsement from sport/NGB | 30 |
| Personal statement | 20 |
| **Total** | **100** |

1. **If for any reason the recipient is suspended from their sport for an extended period i.e. over 6 months, then the bursary will also be suspended.**
2. **Applicants must provide a letter of support/endorsement the relevant NGB along with the application before the closing date.**
3. **Where in the opinion of the committee an applicant who has received support fails to comply with these conditions of participation, the committee may do one or more of the following:**
* **Withdraw athlete/player eligibility for discounts;**
* **Demand a refund of any discounts provided under the bursary to that athlete/player and recover, as a simple contract debt in any court of competent jurisdiction, from that athlete / player any such refund due and owing to the committee.**
1. **Recipient must agree to:**
* **Comply with the conditions of participation of the programme.**
* **Agree to publicly represent Carlow County Council & CCLSP through the media (social, print, radio) and through a limited number of public appearances.**
* **Conduct him/herself at all times in an appropriate manner and display a positive approach and co-operative behaviour towards his/her NGB , Carlow County Council & CCLSP. Athletes involved in the programme are not expected to behave in a manner which is likely to bring the County Council, CCLSP, their respective sport, or NGB, into disrepute.**
* **Co-operate and abide by any decision relating to the bursary.**

**Signed by Applicant \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applicant (NB If the applicant is under 18 years on or before the 13th Nov 2015 a parent or guardian must countersign the application form).**

**Signed by Parent/Guardian/Carer \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Note for all applicants:** Closing date is the 13th Nov 2015. No late or incomplete applications will be accepted. Due to limited resources one grant of €1,500 will be awarded. The result will be announced at the end of Nov 2015. The decision of the Committee is final. If submitting this form electronically please forward on a hard copy of this declaration by post - we will accept scanned documents.