



*UB WestVic  
Academy  
of Sport*

# **Athlete Application Form**

## **Attaching Additional Information**

Fill in as many sections as possible (if applicable) to support your application. If you need to attach additional information, please attach it to the end of your application and refer to it when appropriate. Once completed, please post the application form to:

Manager of Sports Programs  
UB WestVic Academy of Sport  
PO Box 663  
Ballarat, VIC, 3353

# UB WestVic Academy of Sport Application Form

## **Personal Details**

Name First Name\* \_\_\_\_\_ Surname\* \_\_\_\_\_

Residential Address Street\* \_\_\_\_\_

City\* \_\_\_\_\_

State\* \_\_\_\_\_ Post Code\* \_\_\_\_\_

Telephone: Home\* \_\_\_\_\_ Mobile\* \_\_\_\_\_

Other Details DOB\* \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender\* \_\_\_\_\_

Email\* \_\_\_\_\_

## **Sporting Details**

Sport\* \_\_\_\_\_

State Sporting Association \_\_\_\_\_

Club\* \_\_\_\_\_

Representation Level (indicate highest or latest team selection e.g. "National Juniors")

- Club \_\_\_\_\_
- District / Association \_\_\_\_\_
- State \_\_\_\_\_
- National \_\_\_\_\_

Detailed history of personal performance over the last 3 years (include details where possible e.g. event, date, venue, placing, timing/distance, awards or levels of performances/participation – include additional attachments if required)\*

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\* = Required information

Current level of performance (detail your best performances within the last **12 months**)\*

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Ranking (if available)

- Victoria \_\_\_\_\_
- Australia \_\_\_\_\_
- World \_\_\_\_\_

Sporting Goals (indicate briefly your future goals in your sporting career)\*

- Intermediate (1<sup>st</sup> year) \_\_\_\_\_
- Medium Term (3 years) \_\_\_\_\_
- Long Term (5-10 years) \_\_\_\_\_

Details of present coach

- First Name\* \_\_\_\_\_
- Surname\* \_\_\_\_\_
- Street Address \_\_\_\_\_
- City \_\_\_\_\_
- State \_\_\_\_\_ Post Code\* \_\_\_\_\_
- Home Phone\* \_\_\_\_\_ Mobile\* \_\_\_\_\_

Present Training Venue\* \_\_\_\_\_

\* = Required information

**Educational (ACE) / Vocational Details**

Name of School being attended\* \_\_\_\_\_

Current year level\* \_\_\_\_\_

Vocational Goals\* (please indicate your future vocational goals including the type of career you would like to seek)

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Educational Goals\* (please indicate your educational aims and goals for the future including the level of education you wish to obtain; the specific course of study you would pursue; the qualifications you would aim for; and where you intend to study (if known))

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\* = Required information

## **Level of Support**

Current sponsorships \_\_\_\_\_

Vocational support (job) \_\_\_\_\_

Equipment support \_\_\_\_\_

Other support \_\_\_\_\_

Support indicator\*:

Please place the following **in priority order** by putting a number **(1-5)** where 1 is the highest priority and 5 is the lowest priority in the box preceding each category to indicate the type of support you needed most from the UB WestVic Academy of Sport.

<input type="text"/>	Coaching expertise
<input type="text"/>	National competition experience
<input type="text"/>	Sports Science / Sports medicine services
<input type="text"/>	Athlete Career Education
<input type="text"/>	Other forms of personal support (please specify if necessary)

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## **Declaration**

I do hereby and solemnly declare that the statements made by me remain to date and I make this solemn declaration conscientiously believing the same to be true. I am fully aware that if any of the information provided is found to be false, this application will immediately be considered as unsuccessful and may therefore affect future applications.

(Note: Parent / Guardian is to sign on behalf of the application who is under the age of 18 years old)

Full Name\* \_\_\_\_\_

Relationship to applicant  
(if applicable) \_\_\_\_\_

Address\* \_\_\_\_\_

Signature of Declarant\* \_\_\_\_\_

Date \* (dd/mm/yyyy) \_\_\_\_\_

The UB WestVic Manager of Sports Programs is available to discuss your application and answer any questions on (03) 5327 – 9890.

The application is to be submitted by mail only by printing this form and returning to the address below.

Manager of Sports Programs  
UB WestVic Academy of Sport  
PO Box 663  
Ballarat, VIC, 3353