



APPLICATION FORM FOR COURSE ATTENDANCE

IPC Swimming is inviting you to apply to attend the Functional Classification System [FCS] practical course to be conducted in conjunction with the British International Disability Swimming Championships to be held in Sheffield, Great Britain on 16-18 April 2010.

Programme:

Arrival date:	12 April
Theory session:	13 April morning
Classification of athletes:	13-15 April
Competition dates:	16-18 April
Departure date:	19 April

The trainee classifiers are required to arrive on the 12 April. The theory session will be conducted in the morning of the 13 April, with classifications on 13-15 April and observation during competition on 16-18 April.

Attendance numbers will be restricted to 6 participants for the classification course and it is therefore necessary to apply for a position. Trainee Classifiers are required to have completed the IPC Swimming online classification course to be eligible to attend the course. Each application will be assessed according to the knowledge of the applicant. Successful participants will be notified by email. Each successful participant will be required to bring with them the classification manual and other relevant documentation.

All successful applicants are required to attend the full course i.e. theory sessions, practical session involving the classification of the swimmers and attendance for the full duration of the competition.

All applicants are to be fully conversant in the English language.

All details are to be printed

NAME:.....

ADDRESS:.....

COUNTRY:.....

TELEPHONE NO:.....

FAX NO.....

EMAIL:.....



Date of completion of the IPC Swimming online course:

List attendance of authorised FCS courses within in the past 2 years:

<u>Competition</u>	<u>Country</u>	<u>Presenters Names</u>
1.....		
2.....		
3.....		
4.....		

List the competitions where you have classified at a disability competition within the last 2 years. Identify the disability of the swimmers classified or competing.

<u>Competition</u>	<u>Country</u>	<u>Disability</u>
1.....		
2.....		
3.....		
4.....		

Are you conversant with the English language Yes/No

Type of trainee *[circle which is applicable]:*

- | | |
|-------------------------|------------------------|
| 1. Medical Classifier | Doctor/Physiotherapist |
| 2. Technical Classifier | Coach/Trainer |

How many years have you been coaching

Former Swimmer Yes/No

Please return the completed application form by 1 March 2010 to:

IPC Swimming

E-mail: agnes.szilak@paralympic.org

Or by fax: +49 228 2097 209