DSCC RECOMMENDATION

These forms should be sent directly from DSCC to

Con Dixie (dixie@nmmu.ac.za)

These forms are to be received by 15 September 2014.

				d has the sup		nayers.	
n addition, v	we would like to r	ecommend this	s candidate fo	or the following	ng reasons:		
		mmendation a					

	Priority	Name	
	1.		
	2.		
	3.		
	4.		
	5.		
	6.		
	7.		
	8.		
	9.		
	10.		
Signa	atures:		
	(E	SCC Convenor)	(DSCC Secretary)

We recommodified	e accepted to attend the District (Level 2) Coa	(name of aching Course to be held at George in			
We confirm that s/he is an active coach in our district and has the support of local elite and district players.					
In addition, we would like to recommend this candidate for the following reasons:					
(District Exec	cutive to motivate their recommendation abov	/e.)			
•		,			
Signatures:					
	(District President)	(District Secretary)			
Date:					

I,	(name & surname) of Bowling Club,
	to be considered as a Candidate for the District (Level 2) Coaching Course at (please indicate your e of course):
a)	Outeniqua BC (South) – 16 – 20 November 2014
b)	Wanderers BC (North) − 11 − 15 January 2015
Health	n or disability issues the trainers should be aware of:
Dietar	ry requirements: Regular / Vegetarian / Halaal / Kosher / Other:
	(indicate appropriate choice)
Level	of Computer Literacy: Word Processing / Spreadsheets / Presentation / Email / Internet (indicate appropriate choices)
Can b	oring a <u>digital camera / laptop / tablet / none</u> to use at the course (<i>indicate appropriate choices</i>)
Langu	uage on Certificate English / Afrikaans (√ to indicate appropriate choice)
1.	I understand that if I find, during the course (includes all activities up to the time of qualification), that I am unable to continue for whatsoever reason, I will reimburse my Club / District and NSCC with monies that have been paid on my behalf and, if required, return material received to NSCC.
2.	I undertake to attend all contact-sessions. The material that I will receive, when accepted, will be studied before the sessions as indicated by the Course Co-ordinator. I understand that I will be expected to discuss the content of this material during the course.
3.	I further understand that I will have to accept the considered opinion of the training team, if told that I may not be suitable for the current training scheme.
Candi	date Signature Date/
Note: Dix.	All forms may be completed electronically or printed, completed & scanned prior to emailing them to

4.	Why do you want to upgrade your qualification from Club (Level 1) to District (Level 2)?
5.	What are your goals in coaching? SMART goals!
6.	What specifically are you planning to do with your District (Level 2) qualification?

. vvnat do you e	xpect from the Distri	ct (Level 2) cours	Se ?	

8. Describe examples of the coaching of individuals you have done over the past 2 years.

Player info (not name)	Description of Issue	Description of Coaching	Reflection on Outcome

9. Describe examples of any group coaching you may have done over the past 2 years.

Group info (not name)	Description of Issue	Description of Coaching	Reflection on Outcome

Curriculum Vitae

All the sections provided below are for the purpose of allowing the trainers to gain some knowledge of the candidates prior to the course. Any section where you have no information to provide, you may either delete it or leave blank.

Surname				
Initials				
Home address				
Postal addres	SS			
Telephone:	Home			
relephone.	Cell			
	Fax			
E Mattada.				
E-Mail addres				
PERSONAL	DATA			
Nationality				
Identity No				
Home langua	age			
Other langua	ges			
Present outsi	de interests			
Strong points	;			
Weak Points				
LAWN BOW	LS			
Affiliation		Bowls SA No:		
Bowling Club				
Bowls size us	sed	00 / 0 / 01 / 2 / 3 / 4 / 5 / 6 (circle appropriate choice)		
Qualifications		Coach: Badge No: Level: Qualification Date: Latest Refresher Date: Technical Official: Badge No: Level: Latest Refresher Date:		
Administratio	n			

Player Record

Coaching Record

			0010
		Hours 2012:	
		Hours 2013:	
		Hours	2014:
Re	search Interests		
Re	ferees	(i)	<i>-,,</i>
			Telephone: Cell:
			Email:
		(ii)	
			Address: Telephone: Cell:
ED	DUCATIONAL QUALIFICATIONS		
HI	GHER EDUCATION		
Un	iversities/Colleges attended		
Qι	alifications obtained		
Ma	ajor subjects		
Otl	her Training	(i)	
		(ii)	
ΕN	IPLOYMENT HISTORY		
(Lá	atest first)		
1.	Name of Institution		
		Years	: escription:
^	Name of Institution	J00 D	escription.
۷.	Name of Institution	Years	:
		Job D	escription:
3.	Name of Institution		
		Years	:
		Job D	escription:

GENERAL

Any additional information you would like to add.