



**ELITE TRAINING GRANT FOR ATHLETES WITH DISABILITIES /  
INDIVIDUAL ATHLETES SUPPORT SCHEME /  
SPORTS AID GRANT FOR ATHLETES WITH DISABILITIES**  
*Application Form*  
**2023-2024**

The information you provide in this application form is the basis for assessing eligibility for assistance under the Elite Training Grant for Athletes with Disabilities (ETGD) / Individual Athletes Support Scheme (IASS) / Sports Aid Grant for Athletes with Disabilities (SAGD). The Application Guidelines should be read in conjunction with the explanatory notes when completing this application form. Application form and Guidelines can be downloaded from the HKS I website ([www.hksi.org.hk](http://www.hksi.org.hk)).

The personal data provided will only be used by the HKS I for purposes relating to this application. Only persons duly authorised by the HKS I will be given access to your personal data. For correction of or access to the personal data you have submitted, please contact the staff of the High Performance Administration Department.

Please submit the completed form to High Performance Administration Department, Hong Kong Sports Institute, 25 Yuen Wo Road, Shatin, Hong Kong on or before **25 November 2022**. Performance attained between 26 November and 31 December 2022 should be reported on or before 6 January 2023, if any. **Late or incomplete applications will NOT be considered.**

**PART A (To be completed by the applicant) (Please type or print)**

1. **Fund(s) Applied**     Elite Training Grant for Athletes with Disabilities<sup>1</sup>  
                                   Individual Athletes Support Scheme<sup>2</sup>  
                                   Sports Aid Grant for Athletes with Disabilities<sup>3</sup>

Sport: \_\_\_\_\_  Full Time Training     Part Time Training

2. **Personal Particulars**

Name: (*English*) (*Surname*) \_\_\_\_\_ (*Other Name*) \_\_\_\_\_  
(as per your HK ID Card/Passport)

Name: (*Chinese*) \_\_\_\_\_ Gender: \* Male / Female    Age: \_\_\_\_\_

Date of birth: \_\_\_\_\_ (dd) \_\_\_\_\_ (mm) \_\_\_\_\_ (yyyy)    Place of birth: \_\_\_\_\_

Nationality: \_\_\_\_\_    Hong Kong ID No.: \_\_\_\_\_

Residence in HK since: \_\_\_\_\_ (dd) \_\_\_\_\_ (mm) \_\_\_\_\_ (yyyy)    Occupation: \_\_\_\_\_ (\*Full/Part Time)

School (if you are currently studying) : \_\_\_\_\_  
(\*Primary School / Secondary School / Post-Secondary Institute)

Postal address: \_\_\_\_\_

\_\_\_\_\_ Day-time contact tel. no.: \_\_\_\_\_

Email address: \_\_\_\_\_

Emergency Contact Person : \_\_\_\_\_    Telephone Number : \_\_\_\_\_

\* Delete as inappropriate

- Remarks:**
1. Elite para athletes of Tier A and Tier B sports, and sports supported under the IASS can apply for ETGD.
  2. Athletes of Paralympic/Asian Para Games Sports, who are not supported under Tier A sports but meet the specified funding criteria can apply for IASS (who will receive ETGD and a programme grant).
  3. Elite para athletes of other sports which are not supported under Tier A and Tier B sports, and IASS can apply for SAGD.

3. Grant received in 2022-2023 (please put “✓” in the box)

Scheme:  ETGD  IASS  SAGD  No

Category: \* Elite A+ / Elite A / Elite B / Elite C \* Elite A / Elite B / Elite C

\* Delete as inappropriate

4. Records of Achievements

- ♣ Provide information on your results (in order of merit) achieved in international/major local competitions in the period between January 2021 to December 2022\*.  
\*Applicants who are grant recipients in 2022-2023 (refer to above point 3) only need to provide information on your results achieved in the year of 2022 (January to December 2022), if any.
- ♣ Results achieved after December 2022 will be considered for support in 2024-2025.
- ♣ Support all your achievements with documentation (e.g. official results, press reviews, etc.)
- ♣ Use separate sheet if additional writing space is required

A. Individual Results

Date (dd/mm/yyyy)	Name of Competition / Venue (Please provide both English and Chinese versions for data input)	Event (e.g. 100m , singles, etc.) (Please provide both English and Chinese versions for data input)	Results/ Position (e.g. score, timing, distance in metre, etc.)	No. of Entries for your Event	No. of Competing Countries/Regions for your Event	Personal Best for this Event



**5. Training programme for 2023-2024** (To be agreed by your Coaching Supervisor)

♣ Please state venue, frequency, duration, months on total, etc.

**6. Competition plan for 2023-2024** (To be agreed by your Coaching Supervisor)

♣ Please state name of competition, date, place, targets to be achieved.

**7. Major competitions and goals in the next 4 years** (To be agreed by your Coaching Supervisor)

(Please provide both English and Chinese versions)

**8. Declaration**

I declare that the information I have provided in this application is true and correct. I understand that non-conformity with the submitted training and competition plan [as listed in (5) and (6)] for the year 2023-2024 without valid reasons, or breach of terms in the Agreement might result in cessation of funding and a refund in whole or in part of the payment.

Signature of applicant: \_\_\_\_\_ Date: \_\_\_\_\_

\* Delete as inappropriate

**PART B Parental/Guardian Consent (For applicants under 18 years old)**  
**(To be completed by parent/guardian)**

I consent to my child/ward, \_\_\_\_\_ (Name) being assisted by the *Elite Training Grant for Athletes with Disabilities (ETGD)* / *Individual Athletes Support Scheme (IASS)* / *Sports Aid Grant for Athletes with Disabilities*, and I *\*agree/do not agree* to let *\*him/her* attend training and competitions as shown on the submitted schedule. I understand that non-conformity with the submitted schedule [as listed in (4) and (5)] without valid reasons, or breach of terms in the Agreement might result in cessation of funding and a refund in whole or in part of the payment.

Signature of parent/guardian: \_\_\_\_\_

Name in BLOCK letters: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address (if different from applicant): \_\_\_\_\_

\_\_\_\_\_ Day-time contact tel. no.: \_\_\_\_\_

**PART C Recommendation and Assessment by Head Coach / Coaching Supervisor**

Name of Coaching Supervisor: (English) (English) (Surname) \_\_\_\_\_ (Other name) \_\_\_\_\_

(Chinese) \_\_\_\_\_ (\*Mr/Ms/Miss)

Address: \_\_\_\_\_

Email address: \_\_\_\_\_ Day-time contact tel. no.: \_\_\_\_\_

Coaching Qualification: \_\_\_\_\_

Position at National Sports Association: \_\_\_\_\_

\* Delete as inappropriate

**Please fill in either 1 or 2 below:**

**1. For new applicants**

**Comments in the following areas with grading:**

(1 – Poor 2 – Fair 3 – Satisfactory 4 – Good 5 – Excellent)

Concerned areas	Rating Scale					Remarks
	5	4	3	2	1	
Commitment to training and competitions						
Potential for further advancement						
Consistent level of performance						
Contribution to team work						

Other comments/recommendations (if any): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## 2. For current recipients applying the grant in 2023-2024

### 2.1 General Assessment:

Concerned areas	Rating Scale					Remarks
	5	4	3	2	1	
Commitment to training						
Determination to pursue excellence						
Attendance and Punctuality						
Contribution to future international results						
Potential for further improvement						

### 2.2 Sport-specific Assessment:

Training Targets in 2022-2023 <i>(e.g. time trial, specific skill enhancement, team work, etc)</i>	Target Met	Target Not Met	Comment

Competition Targets in 2022-2023 <i>(No need to complete this section if no competitions have been attended)</i>	Target Met	Target Not Met	Comment

Other Targets in 2022-2023 <i>(e.g. Fitness, Psychology / Nutrition / Discipline / Attitude, etc)</i>	Target Met	Target Not Met	Comment

Improvements to be made in 2024-2025	Comment

**2.3 Other assessment mechanism/components (if applicable) and overall recommendations:**

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**2.4 I am satisfied with Applicant's performance in 2022-2023**

Yes

No

**2.5 Applicant is recommended to continue to receive the current DFS grant level in 2023-2024**

Yes

No

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PART D Endorsement by the National Sports Association (NSA)**  
**(To be endorsed and signed by a senior official e.g. President, Chairman, Hon Secretary of the NSA)**

Name of Association: \_\_\_\_\_

Name of Responsible Person: (English) (Surname) \_\_\_\_\_ (Other name) \_\_\_\_\_

(Chinese) \_\_\_\_\_ (\*Mr/Ms/Miss)

Position at NSA: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ Day-time contact tel. no. \_\_\_\_\_

Fax no.: \_\_\_\_\_ Email address: \_\_\_\_\_

\* \* \* \* \*

1. I ***\*agree/do not agree*** to the above assessment and comments by the Head Coach / Coaching Supervisor.

2. Comments/Recommendations on the applicant:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. I hereby certify that the information given above is true and correct and I ***\*endorse/do not endorse*** the application.  
(Please state reason(s) if you do not endorse the application.)

\_\_\_\_\_  
\_\_\_\_\_

4. I ***\*endorse/do not endorse*** the appointment of \_\_\_\_\_ as the coaching supervisor of  
the applicant. (name of coach)

Signature of Official : \_\_\_\_\_

Name (English) : (Surname) \_\_\_\_\_ (Other name) \_\_\_\_\_

(Chinese) : \_\_\_\_\_ (\*Mr/Ms/Miss)

Position at NSA : \_\_\_\_\_

Tel. no. \_\_\_\_\_ Email address: \_\_\_\_\_

Date : \_\_\_\_\_ Association's Chop: \_\_\_\_\_

\* Delete as inappropriate