

**Hong Kong Paralympians Fund**  
**Application Form for**  
**Subsistence Grant to Athletes with Disabilities**  
**covering April 2010 to March 2011**  
(Deadline for application: 4 January 2010)

Please read the guidelines before completing this application form.

**(A) Personal particulars**

Name (Chinese)	(English)
Hong Kong ID Card No./Passport No.*	Nationality
Sex (Male / Female)*	Age
Date of birth (dd/mm/yy)	Place of birth
Home address	
Correspondence address (if different from home address)	
Telephone number Home: _____ Office: _____ Mobile: _____	

\* Delete as appropriate

**(B) Record of sporting experience and achievements**

Type of sport				Since when		
Achievements (please provide separate sheet with information in the following format) (please provide your best performances in order of merit, with supporting documentation, e.g. official results, press reviews, etc.)						
<i>Individual Results</i>						
Date	Name of Competition/ Venue (in English and Chinese)	Event (e.g. 100m, singles, etc.) (in English and Chinese)	Results/ position (e.g. score, timing, distance in metre, etc.)	No. of entries for the Event	No. of competing countries/ regions for the Event	Personal best for the Event
<i>Team Results</i>						
Date	Name of Competition/ Venue (in English and Chinese)	Event (e.g. relay, doubles, etc.) (in English and Chinese)	Results/ position (e.g. score, timing, distance in metre, etc.)	No. of entries for the Event	No. of competing countries/ regions for the Event	Name(s) of Team Member(s) (in English and Chinese)
<i>Individual Award Honoured in Major Competition</i>						
Date		Name of Competition/Venue (in English and Chinese)			Award	
<i>Ranking (ranking should be supported by officially published/endorsed ranking lists of Asian/International Federation)</i>						
2008	(Asian)			(World)		
2009	(Asian)			(World)		

**(C) Amount of grant applied for and period of subsidy  
(maximum \$2,080 per month)**

Amount of monthly grant applied for (\$):
From (dd/mm/yy): _____
To (dd/mm/yy): _____

**(D) Reasons/justifications for application for subsistence grant**

**(E) Competition goals and training programme (as agreed by your Coaching Supervisor)**

**(F) Record of employment history (last 5 jobs)**

	Company	Job title/ nature	Wages (\$) per month	From (dd/mm/yy) To (dd/mm/yy)
1				
2				
3				
4				
5				

**(G) Highest educational attainment**

Highest educational attainment	Date of Completion

**(H) Reasons for terminating/suspending employment/education**

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**(I) Amount of income loss, if any**

Monthly income (\$):
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**(J) Any other sports-related funding support received / to be received (e.g. the Sports Aid for the Disabled Fund)**

Year	Funding sources	Total amount (\$)	From (dd/mm/yy) To (dd/mm/yy)
2008-09			
2009-10			
2010-11			

**(K) Any other funding support for this proposal**

Funding sources	Amount (\$) per month	From (dd/mm/yy) To (dd/mm/yy)

**(L) Any other allowance currently received, including the Comprehensive Social Security Assistance**

Name of the allowance: _____
Purpose of the allowance: _____
Amount (\$) per month: _____

**(M) Applicant's declaration**

I have read and well understand the guidelines attached to this application and hereby certify that the information given above is true and correct.
Signature: _____
Applicant's name: _____
Date: _____

Please attach documentation/supplementary information where necessary.

**(N) Parental/Guardian Consent (for applicants under 18 years old)**

I have read and well understand the guidelines attached to this application, and consent to my child/ward, _____ (name) being assisted by the Hong Kong Paralympians Fund.
Signature: _____
Name: _____ (English) _____ (Chinese)
Relationship: _____
Date: _____
Day time contact tel. no.: _____
Address (if different from Applicant's): _____
_____



**(P) Endorsement by the Sporting Organisation**  
**(to be completed and signed by a senior official of the Sporting Organisation)**

Name and address of Sporting Organisation:

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Please specify priority if more than one applicant in this category:

(i.e. 1, 2 or 3): \_\_\_\_\_

Recommendation:

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

Name: \_\_\_\_\_ (English) \_\_\_\_\_ (Chinese)

Position: \_\_\_\_\_

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

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

Organisation Chop: \_\_\_\_\_

Please attach documentation/supplementary information where necessary.