

**8.0 Application Process for Requesting Financial Assistance for Athletes,
Coaches and Officials**

Applicants may apply for financial assistance through the Sports Manitoba Athlete Assistance Program or through the Coaching Manitoba grant program. Small grant opportunities, which will vary from year to year, may be available through the Manitoba Water Polo Association (MWPA). All financial assistance will be provided on a post-season basis. Any decisions regarding financial assistance, if applying to the MWPA, will be made by an ad hoc committee of the Board of Directors.

Athletes

- 8.1 Athletes must complete an application form and a letter of introduction. The letter must include a personal introduction and specific goals for water polo development. Please use the appropriate appendix application form:
Appendix A - Sport Manitoba Athlete Assistance Program: For National Team Athletes
Appendix B - MWPA Financial Assistance Application Form: For National Development Team Athletes

Coaches

- 8.2 Coaches may apply for financial assistance for educational courses, events and clinics. Please use the appropriate appendix application form:
Appendix C- Coaching Manitoba Grant Program

Officials

- 8.3 Officials may apply for financial assistance to offset costs at an Invitational event. Please use the appropriate appendix application form:
Appendix B - MWPA Financial Assistance Application Form



APPENDIX A: SPORT MANITOBA ATHLETE ASSISTANCE PROGRAM APPLICATION

1. Provincial Sport Organization: _____ Date of Application: _____
2. Name of Athlete/Team: _____ Gender: _____
 Address: _____ City: _____
 Province: _____ Postal Code: _____
 Birth Date: _____ Date on which athlete became Manitoba Resident: _____

3. Results at National Championships/Canada Games during last competitive season.

Name of Competition	Location	Event/Classification (Level/Division/ Category, etc.)	Age Group	# of teams/ competitors in event	# of Provinces/ Territories	Final Rank	Month/ Year

4. Athlete's National Team Background. (Complete only if national team is sponsored and managed by the National Sport Organization)
 Most recent/current national team involvement:
 Month/Year: _____ to _____ Other: _____
 Team: _____ Tel. No. _____
 Name of National Team Coach: _____



SPORT MANITOBA ATHLETE ASSISTANCE PROGRAM APPLICATION

5. Results of international level of competition during last competitive season.
i.e. World Championships, Olympics, Pan Am Games, Commonwealth Games etc.

Name of Competition	Location	Event/Classification (Level/Division/ Category, etc.)	Age Group	# of teams/ competitors in event	# of Countries	Final Rank	Month/ Year

6. Please state your personal goals and specific performance objectives for the upcoming competitive year.

7. I hereby authorize my Provincial Sport Organization's submission of this application on my behalf. I have read the criteria/guidelines under which athlete assistance is awarded and I agree to abide by them under the guidance of a program monitored by my Provincial or National Sport Organization.

8. I consent to give Sport Manitoba/PSO permission to disclose my personal information as listed herein for communication and media purposes.

Applicant's signature

Date:

Parent/Guardian signature (if athlete under 18 years)

Date:

If it is not possible for signatures to be obtained, applicants are asked to complete the following to acknowledge acceptance and consent.

By checking this box, I acknowledge that I have read and understand the consent provisions above. Date: _____

I _____ agree to the consent provisions above: Date: _____

For athletes under the age of majority:

By checking this box, I acknowledge that I have read and understand the consent provisions above. Date: _____

I _____ agree to the consent provision above: Date: _____



APPENDIX B: MWPA FINANCIAL ASSISTANCE APPLICATION FORM

Applicant Information (Coach/Official)

Name: _____

Address: _____

Phone number: _____ Email: _____

Level of certification: _____ NCCP #: _____

Applicant Information (Athlete)

Name: _____ Birthdate (M/D/Y): _____

Address: _____

Phone number: _____ Email: _____

Club Information

Name: _____

Address: _____

Phone number: _____ Email: _____

Event Information

Event Name: _____

Address: _____

Date of event: _____ Cost to attend: _____

Event Description: _____

Have you previously received funding from the MWPA?
(Please circle)

Yes No

If yes, what was the date you last received financial assistance? _____

Have you previously received funding from another source to assist this particular event?
(Please circle)

Yes No

If yes, please provide details:

Applicant Declaration

I, the undersigned, certify that the above information is true and correct.

Name: _____

Signature: _____ Date: _____

Verification from Club: (this section is to be completed by the club)

Name of Club: _____

Contact Person: _____ Date: _____

Signature: _____

Please submit completed form to:
MWPA
145 Pacific Avenue
Winnipeg, Manitoba
R3B 2Z6
Attention: MWPA Executive Director

