

**PacificSport Interior BC
Athlete Travel Grant**

PacificSport Interior BC acknowledges the significant contribution of regional centre coaches and their commitment to the development of high performance athletes. PacificSport also recognizes the need for financial aid to support the training and competition needs of **national calibre athletes** within our region. The intent of this grant is to provide qualified athletes with travel assistance through the support of PacificSport and the Kamloops Sports Legacy Fund.

“Keeping our heroes at home”

Applications, based on the attached ***Application Form – Travel Grant***, are to be submitted to the Executive Director, PacificSport Interior BC. Selection of deserving athletes/teams will be based on the following criteria:

- a. athletes must have achieved their national championship or equivalent entry standard as set by their National Sport Organization, or the athlete or team must have qualified for a national/international championship or the highest level of competition in that sport (i.e., Senior Nationals, Olympic Trials, Major Games Trials, and World Championships);
- b. athletes who have achieved provincial carding status will be eligible;
- c. each athlete or team will be eligible for one grant per year only;
- d. Minimum standard is PacificSport registered athletes that having been identified by their PSO according to the Provincial level criteria; a centre has the flexibility to open up to National Sport Canada Funded athletes if they choose;
- e. the funds will be used for travel expenses only;
- f. the amount requested must be matched;
- g. normally, the maximum annual allocation of funds will not exceed \$800.00 to any one core sport;
- h. normally, the maximum annual allocation of funds will not exceed \$400.00 to any one athlete/team;
- i. the application for funding must be (1) based on performance(s) achieved within the fiscal year (April 1 – March 31) and (2) be submitted to and received by our office before March 31st and,
- j. must be a BC Athlete who is registered with PacificSport.

The Travel Advisory Committee of the PacificSport Regional Board of Directors will use the above criteria as guidelines. All travel applications must be approved by the Committee. The decisions of the Committee will be final.

The Travel Advisory Committee will meet 3 times each calendar year to review bursary applications and disperse funds. The allocation of funds will depend on the amount and availability of funds.



PacificSport Interior BC
Tournament Capital Centre
910 McGill Road
Kamloops, B.C. V2C 1E1
(250) 828-3344 Fax: (250) 828-3619

Athlete/Team Information

Name: Birth Date (mm/dd/yr):
Sport:
Head Technical Coach:
Coach contact numbers:
Coach email address:

Personal Information

Home Number: Other:
Fax: Email:
Address: City:
Province: Postal Code:

Sport Information

Do you receive Sport Canada(national) Carding Funds
Do you receive Provincial AAP Funding?
Primary Training Site:
Team/Club:

Scope of Achievement and Performance

Please indicate highest achievement in your sport, years participated, and results.
Include all performances (if applicable) for the following: World Championships, Commonwealth Games, Pan-American Games, World Cup Circuit, National Championships, Provincial Championships, Canada Games

Multiple horizontal lines for recording performance details.

If approved, what will the funds be used for? Please itemize your travel expenditures and who is paying those expenses. Also, include location & dates of the competition?

List of Travel Expenditures:

Who is covering those costs?

Date of Competition: _____ Location: _____

Name of Competition _____

Please indicate how your team or athletes have qualified for the competition?

Amount requested _____

I _____, declare the information in this application is accurate. This is to certify that the grant will be used for the championship/competition as applied for, and if the athlete does not attend, due to illness, injury or other reasons, the funds will be reimbursed back to PacificSport.

Applicant Name (Please print)

Signature

Coach Name (Please print)

Signature

Date Y/M/D _____

Please include the name of who the cheque will be made out to along with mailing address:

<i>Travel Advisory Committee</i>	<i>Internal Use Only</i>
Year applying for grant _____	
Current level of athlete/team _____	
Approved: YES	NO
	Comments:
	Amount: _____
_____ _____ _____	
Date _____	
Signature _____	Printed name _____