

Athletic Performance:

Please attach point form responses to the questions listed below:

This information must be provided in typewritten format and organized as formatted below.

1. Goals

a) Please list your personal goals for this competition:

b) What are your long-term goal(s) outside of this competition:

c) Please list how this funding support will assist you in achieving your goal(s)³.

Additional Information:

Feel free to attach or provide any further information that you feel will enhance your application.

It is acceptable to submit this information after the application deadline date.

The information that is provided in this application is a true and correct representation.

By signing below, I am endorsing the application for the athlete listed above.

Signature of Parent/Guardian

Date

Name (please print)

Please return signed applications to:

Attn: Elite Athlete Assistance Program Selection Committee
P.O Box 159
Ile a La Crosse, Saskatchewan
SOM 1C0

Phone: (306) 833-2420
Fax: (306) 833-2177
E-mail: l.gardiner@sasktel.net