

APPLICATION FOR 2010 COACHING ENHANCEMENT GRANTS

EVENT _____ DATE OF EVENT _____

DATE APPLICATION SUBMITTED _____ USATF COACHES REGISTRY , YES ___ NO ___

NAME _____

ADDRESS _____ CITY _____ ZIP _____

CELL PHONE _____ HOME PHONE _____

EMAIL: _____ (needed for acceptance notification)

CURRENT AFFLIATION/EMPLOYMENT _____

COACHING EDUCATION CERTIFICATE: Level 1 ___ Level2 ___ Level3 ___

Athletes coached who participated in the Junior or Senior Nationals in the last five years:

1. _____ event _____ affiliation _____

2. _____ event _____ affiliation _____

3. _____ event _____ affiliation _____

4. _____ event _____ affiliation _____

****Please include a two paragraph statement of your career goals and interest in selected event.****

Send to: Terry Crawford, Director of Coaching, USATF, terry.crawford@usatf.org

132 E. Washington Ave., Indianapolis, Indiana, 46204

Phone: 317-713-4671

The Coaches Advisory Committee will approve all grants awarded!