



Recognition of Prior Learning

Coaching Application Form

A. Candidate Details

Name: _____

Address: _____

Phone: _____ E-mail: _____

B. Qualification Request

Nominate the level of qualification for which you wish to be awarded credit.

<i>Please tick</i>		<i>Please tick</i>	
Starting Out In Coaching	<input type="checkbox"/>	Display Coach	<input type="checkbox"/>
Basic Skills	<input type="checkbox"/>	Junior Coach	<input type="checkbox"/>
Recreation Coach	<input type="checkbox"/>	Senior Coach	<input type="checkbox"/>

C. Required Information

Ensure that you enclose ALL of the following with your application:

- | | |
|---|--|
| <ol style="list-style-type: none"> 1. Application Form 2. Coaching C.V. (<i>evidence of relevant training, experience, and achievements</i>) 3. Testimonial from respected colleague or supervisor 4. Copies of all relevant certificates and qualification materials, including valid First Aid 5. International Candidates please supply copies of New Zealand visa and/or work permit | <p style="text-align: center;"><i>Please tick</i></p> <input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> |
|---|--|

Send your completed application to:
National Education Manager
GymSports New Zealand
PO Box 9485 Newmarket, Auckland
Phone: (09) 306 0291
E-mail: NEM@gymsportsnz.com