|  |
| --- |
| ***Notes on completing this application:***   1. *This form is to be completed by the* ***Team Captain/ Representative.*** 2. *Personal data provided in this form will be used only for processing the application and administrative matters.* 3. *The completed application form with the relevant documents should be submitted to STAS Administrator at Room LG3002 (via lift 6) by Wednesday, 31 July 2024.* 4. *If any assistance or further information is required, please seek advice from your* ***DSTO Sports Advisor*** *or* ***STAS Administrator*** *via email* [*stuta@ust.hk*](mailto:stuta@ust.hk) *or call 2358 5848.* 5. \**Please delete as appropriate.* |

|  |  |
| --- | --- |
|  | Dean of Students’ Office  Sports Team Assistance Scheme (STAS)  **Application form** |

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **A. Name of Student Sports Club/ Group:** | | | | |  | | | | |
| ITSC email: |  | | | | Mail Box: |  | | |
| Name of Chairman: \*Mr. /Ms | | |  | | | | | (SURNAME in Block Letters) |
| ITSC email: | | Mobile | | | Contact No: | |  | |

**B. Particulars of the Sports Team**

|  |  |  |  |
| --- | --- | --- | --- |
| Name of the Team: |  | | (\*M / F / M+F / Mixed) |
| Number of Team Members: | |  |  |

**C. Particulars of Applicant (Team Captain/ Representative)**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Name: | \*Mr./Ms | |  | | | Post: \*Team Captain/ Representative |
| (SURNAME in Block Letters) | | | | |  | |
| ITSC email: | |  | | Mobile No: | |  |

**D. Particulars of the Proposed Competition**

*(Please attach pamphlets, information booklets or relevant material(s) if available)*

|  |  |  |  |
| --- | --- | --- | --- |
| Name of the Competition: | | |  |
| Organizer(s): | |  | |
| Objective(s) of the Competition: | | | |
| 1. |  | | |
| 2. |  | | |

Format of the Competition: *(Please tick the appropriate box(es))*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| □ | \*One-day/Two-day event on | | | |  | | | (dd/mm/yy) at | | |  | (venue) | | |
| □ | Series of matches from | |  | | | to |  | | (mm/yy) at | |  | (venue) | | |
| □ | Intervarsity event □ Open event | | | | | | | | | | | | | |
|  | Participating units include | | |  | | | | | | | | | | |
| Max. Number of Registered Competitors in the team: | | | | | | | | | |  | | | |
| Benefits to be gained from participating in the Competition: | | | | | | | | | | | | |
| 1. | |  | | | | | | | | | | | |
| 2. | |  | | | | | | | | | | | |

1. **Particulars of Team Assistance Requested**

* Max.2 hours per week for Team practice (M/ F /Mixed); OR

Max. 3 hours per week for Team practice (M + F)

* Max. 2 hours per match/ performance; OR

Max. 6 hours OR actual hours for the 1-day event

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **Item** | | | | | |  | **Amount Required** |
| **1.** | **Registration Fee Subsidy** of the proposed competition (listed in D.) | | | | | | = | **HK$** |
| **2.** | **Coaching Fee Subsidy**  Covering period from / / to / / (dd/mm/yy) | | | | | |  |  |
|  | 1. **Training hours for practice** | weeks | X | hrs per wk | X | hourly rate  HK$ | = | HK$ |
|  | 1. **Coaching hours at the competition** | match(es) or event day(s) | X | hrs per time | = | HK$ |
|  |  | **Total** | **=** | **hrs** | **=** | **HK$** |

1. **Particulars of Nominated Sports Team Coach**

*(Please tick the box as appropriate and note the application will NOT be processed if any required information or document is missing)*

*# Personal Information Record and Job Application Forms can be downloaded at* <https://dst.hkust.edu.hk/eng/detail.php?catid=6&sid=49>

Coach to be arranged by Dean of Students’ Office

A coach is nominated*(Please fill in the information & attach the required documents together with this application.)*

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| *Name:* | *\*Mr. / Ms* | |  | | | | | *(\* Full-time / Part-time)* | |
|  | | | | *(English)* | | *(Chinese)* | | |  |
| *Contact. No.:* | |  | | | *Email Address:* | |  | | |

*Completed Personal Information Record Form # of the nominated part-time coach* *Attached Not attached*

*Completed HKUST Job Application Form # of the nominated part-time coach* *Attached Not attached*

**Is the nominated Part-time Team Coach officially appointed by DSTO in 2023-24?**Yes

No*(Must attach the following required documents together with this application.)*

1. *Photocopies of documentary proof of qualifications and experience*  *Attached Not attached*
2. *Photocopy of HK ID card Attached Not attached*

Signature of Applicant: Date: Society Chop:

Endorsement by DSTO Sports Advisor: Date: