



Dean of Students' Office
Sports Team Assistance Scheme (STAS)
Application form

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 or call 2358 5848.
5. *Please delete as appropriate.

A. Name of Student Sports Club/ Group: _____

ITSC email: _____ Mail Box: _____

Name of Chairman: *Mr. /Ms _____ (SURNAME in Block Letters)

ITSC email: _____ 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)

☐ Interschool 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. _____

E. 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)	
a.	Training hours for practice _____ weeks X _____ hrs per wk	= HK\$ _____
b.	Coaching hours at the competition _____ match(es) or event day(s) X _____ hrs per time	hourly rate HK\$ _____ = HK\$ _____
	Total = _____ hrs	= HK\$ _____

F. 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: _____