



### LEVEL 3 COURSE APPLICATION FORM

Surname:

Given name/s:

Date of Birth:

Sex: Male

Female

Phone:

Mobile Phone:

E-mail:

Current Address:

Nationality:

NIC no:

1. Level 2 – Serial no..... Date Issued  
...../...../..... Place.....
2. First Aid Certificate Yes  No  If Yes, expiry date .....
3. Police Clearance Certificate Yes  No  If Yes, date of issue.....

	INSTITUTION/CLUB/SCHOOL	HIGHEST LEVEL
ACADEMIC QUALIFICATION		
SCHOOL REPRESENTED		
CLUB REPRESENTED		
OVERSEAS CLUBS REPRESENTED		
COACHING EXPERIENCE		
PRESENT EMPLOYMENT		
OTHER		

## CONDITIONS OF ENROLMENT

1. Currently accredited Level two Cricket Coach with minimum 5 years as a practicing Level two Coach
2. Valid first aid course certification
3. Recently issued Police Clearance Certificate (Not more than six months old)
4. Condition of health –Physically fit and mentally sound
5. Attendance to the SLC Coach Education Programs
6. Valid Coaching License
7. Sound knowledge of Cricket.

## CONDUCT & DISCIPLINE

In the event of proven criminal offence or flagrant misconduct or unsatisfactory attendance, SLC reserves the right to expel any participant or to refuse admission to any participant.

## LIABILITY

Sri Lanka Cricket does not take any responsibility whatsoever for injury or damage involving Person or Property. Participants strongly advised to necessary Precautions.

**DURATION OF COURSE - 6 DAYS (1<sup>st</sup> Leg) + 4 DAYS (2<sup>ND</sup> LEG) with ASSESMENT**

**COURSE FEES: RS 400,000.00**

## BENEFICIARY

*I affirm that all information I have provided on this form is true and correct. I agree to comply with all rules and requirements of SRI LANKA CRICKET.*

*I understand and agree that any failure on my part to provide correct information and to comply with all SRI LANKA CRICKET rules and requirements may result in my disenrollment.*

*I understand that enrolment is accepted under the condition that my Course and other fees are paid in full prior to the commencement of the Course.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Certificate Print Name: \_\_\_\_\_

**Return Completed Enrolment Form To:**



Coach Education Unit,  
Sri Lanka Cricket High Performance Centre,  
R. Premadasa International Stadium,  
Colombo 10.  
Ph- 0112677092/3 Fax- 0112665910