

LEVEL I COURSE APPLICATION FORM					
Surname:					
Given name/s:					
Date of Birth:	Sex:	Male	Female		
Phone:	Mobile	e Phone:			
E-mail:	Facsi	Facsimile:			
Current Address:					
Nationality:	NIC r	no:			
Are you currently coaching anywhere else?		Yes / No			
If yes, where and which level?					
Valid First Aid Certification		Yes / No			
If yes, where and date of issue?					
Valid Police Clearance Certificate  If yes, where and date of issue?		Yes / No			
	97)-	7			
	INSTI	TUTION/CLU	B/SCHOOL	HIGHEST LEVEL	
ACADEMIC QUALIFICATION					
SCHOOL REPRESENTED					
CLUB REPRESENTED					
OVERSEAS CLUBS REPRESENTED	Cai		- STEELER	148	
COACHING EXPERIENCE					
PRESENT EMPLOYMENT					
OTHER					

# **CONDITIONS OF ENROLMENT**

- 1. Minimum age for enrolment is 18 and above
- 2. Condition of health should be physically fit and mentally sound.
- 3. Basic knowledge of Cricket by completing "Introduction to Cricket"
- 4. Valid First Aid Course Certification
- 5. Degree or a Diploma in Sport related studies will be an additional advantage
- 6. Police Clearance Certificate must be submitted (Not more than six months old)
- 7. Participants to be selected by the Provincial Education Units

# **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.

### I IARII ITY

SLC does not accept any liability in case of accident, loss or damage to personal effects or Property during the program.

## **DURATION OF COURSE - 4 DAYS**

**BENEFICIARY** 

# **COURSE FEES: RS 10,000.00**

- 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:
Print Name:	

# **Return Completed Enrolment Form To:**

**Western Province Cricket Association** 

**Tel**: 0117446632

Email: westerncoacheducation@srilankacricket.lk

**North Central Province Cricket. Association** 

**Tel**: 06622844001/02

Email: northcentralcoacheducation@srilankacricket.lk

**Northern Province Cricket. Association** 

Tel: 0212214711

Email:northerncoacheducation@srilankacricket.lk

North Western Province Cricket. Association

**Tel**: 0372220008

Email:northwesterncoacheducation@srilankacricket.lk

**Central Province Cricket. Association** 

Tel: 0812422441

Email: centralcoacheducation@srilankacricket.lk

**Southern Province Cricket. Association** 

**Tel**: 0777226029

Email: southerncoacheducation@srilankacricket.lk

**Eastern Province Cricket. Association** 

**Tel**: 06322237754

**Email:** <u>easterncoacheducation@srilankacricket.lk</u>

**Uva Province Cricket. Association** 

**Tel**: 0711201717

Email: uvacoacheducation@srilankacricket.lk















