



**NATIONAL COACHING CERTIFICATION PROGRAMME  
APPLICATION FORM – LEVEL 2A DEVELOPMENT**

MR/MRS/MISS \_\_\_\_\_

SURNAME \_\_\_\_\_ FIRSTNAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ POST CODE \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_ NISA MEMBERSHIP NUMBER \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

CURRENT RINK \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

CHOSEN DISCIPLINE \_\_\_\_\_

- LEVEL 2A Development [ ]

Date on which preceding level was fully passed [ ]

HIGHEST NISA SKATING STANDARD, if applicable. (All records will be checked)

FIGURE	[ ]	DATE PASSED	[ ]
FREE	[ ]		[ ]
ICE DANCE	[ ]		[ ]
FIELD MOVES	[ ]		[ ]
PAIR SKATING	[ ]		[ ]
SYNCHRONIZED	[ ]		[ ]
SPEED SKATING	[ ]		[ ]

ARE YOU STILL COMPETING? YES / NO. Do you require Eligibility information? YES / NO







In order to comply with our Ethnicity Plan and to improve customer care, you are requested to kindly complete the voluntary information tables below:

**Ethnic Origin:** Male  Female  *Please tick as appropriate*

	Individual Member	NISA Official (Judge/ Ref etc.)	Coach
White			
Black African			
Black Caribbean			
Black – other			
Indian			
Pakistani			
Bangladeshi			
Chinese			
Asian – other			
Other ethnic minority			

**Disabilities:**

	Individual Member	NISA Officials (Judge/Ref etc.)	Coach
Deaf			
Visually Impaired			
Physical disability			
Learning disability			
Multiple disability			