**SUMMARY**

The purpose of the Border Swimming Coaches Education Grant Program is to offer support for currently registered clubs to provide and enhance educational opportunities for their coaches. This flexible grant program offers support in critical areas, allowing the respective clubs the opportunity to strengthen themselves as they deem necessary. The goal of this program is to encourage and enhance the further development of a club’s coaching staff.

Each currently chartered Border Swimming Coach member is eligible for two grants of up to $150 for the 2018-2020 period ending August 31, 2020. The club/coach can select any educational opportunity that best fits the particular needs of that club’s coach once per year. A year will be considered from the beginning of the Short course season to the end of the Long Course season.

Eligibility Requirements

All participating clubs must meet the following application requirements:

1. Clubs must be a current member in good standing with USA Swimming and have current charter status with Border Swimming.
2. Coaches must be current Coaches Members of USA Swimming and currently registered in Border Swimming.
3. Grant Program recipients agree to complete certain periodic information requests from Border Swimming related to this program.
4. Documentation of expense and participation must be submitted to Border Swimming within 30 days upon completion of the program for reimbursement.

Clubs/coaches are eligible for grants up to the annual limits of this program.

Qualifying Programs

This program is designed to give clubs and their coaches the flexibility to choose the continuing educational opportunity that best serves their needs. The following are examples of possible qualifying programs:

1. Coaching conferences, seminars and clinics.
2. Business management classes at a local community college or other recognized organization or institution.
3. Educational materials (videos, presentation materials, etc) that can be shared on a club wide basis.
4. Other educational opportunities and programs that are determined to meet this grant program’s goals.

The following are examples of requests that are not eligible for this grant program (please note this is not a comprehensive list):

1. Requests from applicants that do not meet the eligibility requirements listed above or are deemed unacceptable by the Review Committee.
2. Salaries, wages.
3. Equipment purchases.
4. Capital improvements.
5. Maintenance.

Final determination of eligibility for all program requests will be made by a Grant Review Committee.

Grant Conditions

Each grant recipient is required to:

1. Sign and submit the application detailing terms of the grant request no later than 30 days prior to the particular program start.
2. Attest that all eligibility requirements have been met prior to the submittal of the application.
3. Participate in an evaluation of this Grant Program if requested.
4. Provide a final report detailing expenditures along with receipt copies to Border Swimming within 30 days upon completion of this program.

Who Reviews Applications?

Applications will be reviewed by a committee appointed by the Border Swimming Executive Director who will also act as Chair of this committee. This committee shall include the Border Swimming Coaches Representative and no other elected or current members of the Border Swimming Board of Directors.

### APPLICATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Club Name: |  | | | |
| Club Address: |  | | | |
| City, State, Zip: |  | | | |
| Website of Club: |  | | | |
| Club Phone: |  | | | |
|  |  | | | |
| Name of coach who will receive the funding: | | |  | |
| E-mail for coach who will receive the funding: | | |  | |
| Day phone: |  | | Other phone: |  |
|  |  | |  |  |
| Name of Head Coach or Club President: | |  | | |
| E-mail for Head Coach or Club President: | |  | | |
| Day phone: |  | | Other phone: |  |
|  |  | |  |  |
|  | | |  | |

In order to apply for the 2018 Coaches Education Grant Program all clubs must meet the application eligibility requirements and agree to all terms of the program. These requirements and terms are included on the summary pages.

**APPLICATION**

**(CONTINUED)**

Describe/list (including date) the program you are requesting Grant Funding for:

What is the benefit to your club?

By signing this application your club and coach agree to all of the terms listed on page 2 (Grant Conditions).

|  |  |  |
| --- | --- | --- |
| Club Name: |  |  |
| Signature of  Head Coach / Club President: |  |  |
| Signature of coach who will receive funding: |  |  |
| Date: |  |  |

Please send this application and all supporting documents to:

Coach Development Committee Chair

Email Address

Phone Number