



WELSH PROGRAMME ARTISTIC (SYNCHRONISED) SWIMMING

Wales National Development Squad

2017-2018

Athlete Application Form

Surname

First Name(s)

Date of Birth

WASA Membership Number

Contacts

Phone

Email

Club

Current ASA Skill Level

Artistic (synchro) Sporting Achievements

Other Sporting Achievements

Please provide a short personal statement supporting your application

Medical (please circle correct answer)

Have you ever been diagnosed with a heart condition? YES NO

Any serious illness, injury or major surgery in the last three years? YES NO

Any medication requirements? YES NO

Any allergies? YES NO

Do you have a disability and/or require additional support? YES NO

If answered yes to any of the above please provide more details

Next of Kin

Parent/Guardian

Home address

Post code

Phone

Email

Video/photography

We would like to take photos/film and/or comments of you/your child (as applicable) as a record of the day and for promotional purposes.

These images may appear on our website and email newsletters, in our printed materials produced for promotional purposes including leaflets, posters and adverts, in materials sent out to the media, or in reports to funding bodies. We will not include personal e-mail or postal addresses, or telephone or fax numbers on our website or in printed publications.

Please note that websites can be seen throughout the world, and not just in the United Kingdom, where UK law applies. To comply with the Data Protection Act 1998, we need your permission before we take any photographs/film of you/your child.

Are you happy for Video/photography to be taken and used: YES / NO

Swim Wales promotes inclusion and diversity, and welcomes applications from everyone. If you have any particular requirements in respect of the recruitment or interview process please mention this in your covering letter

Swim Wales is an equal opportunities employer and aims to provide a discrimination-free working environment. We are committed to an action plan and policy in line with the Equality Act 2010, which ensures that no job applicant or employee receives less favourable treatment because of a protected characteristic

DIVERSITY MONITORING FORM

The following questions are about your profile and enable Swim Wales to monitor the effectiveness of its Equality Policy. The information provides us with a profile of Swim Wales job applicants so we can assess the representation of different groups and whether more needs to be done to achieve equality of opportunity.

THIS INFORMATION WILL BE SEPARATED FROM YOUR APPLICATION FORM UPON RECEIPT.

AGE

Which age group do you belong to?

<20 years		18-24 years	
25-34 years		35-44 years	
45-54 years		55-64 years	
65-74 years		75+ years	
Prefer not to say			

GENDER

How do you identify yourself?

Male <i>(including female-to-male trans men)</i>		Female <i>(incl. male-to-female trans women)</i>		Non-binary <i>(e.g. androgynous people)</i>		Prefer not to say	
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Is your gender identity different to the sex you were assumed to be at birth?

Yes		No		Prefer not to say	
<i>If yes, please describe the difference:</i>					

MARITAL STATUS

Which of the following best describes your current marital status?

Married		Civil Partnership	
Partnership		Separated	

Divorced		Single	
Widowed		Prefer not to say	

CARING RESPONSIBILITIES

Which of the following best describes your caring responsibilities?

No caring responsibilities		Primary carer of a child/children (<i>under 18 years</i>)	
Primary carer of a disabled child/children		Primary carer of a disabled adult/adults (<i>over 18 years</i>)	
Primary carer of an older person/people (<i>65 years and over</i>)		Secondary carer	
Prefer not to say			

DISABILITY

A disabled person is defined in the Equality Act 2010 as someone with a physical or mental impairment that has a substantial and long-term impact on their ability to carry out day to day activities. Examples are: mobility, manual dexterity, speech, hearing, sight and memory.

Having read this definition do you consider yourself to be disabled?

Yes		No		Prefer not to say	
<i>If yes, please describe the nature of your disability:</i>					

SEXUAL ORIENTATION

Which of the following statements best describes you?

Bisexual		Gay man	
Gay woman/lesbian		Heterosexual/straight	
Other		Prefer not to say	

RELIGION AND BELIEFS

What religion, religious denominations or body do you belong to?

Buddhism		Islam	
Christianity <i>(including Church of England, Catholic, Protestant and all other Christian denominations)</i>		Judaism	
Hinduism		Sikhism	
No Religion		Prefer not to say	
Other philosophical or spiritual belief or religion <i>(please specify):</i>			

NATIONAL IDENTITY AND ETHNICITY

Do you have the indefinite right to work in the UK?

Yes	
No	
<i>If no, please specify your eligibility to work in the UK:</i>	

Which nationality do you most identify with?

Welsh	
English	
Scottish	
Northern Irish	
British	
Mixed-British e.g. Welsh-British (<i>please specify</i>):	
Prefer not to say	
Other national identity (<i>please specify</i>):	

Which ethnic group do you most identify with?

White	British	
	Welsh	
	English	
	Scottish	
	Northern Irish	
	Irish	
	Gypsy or Irish Traveller	
	Any other white background (<i>please specify</i>):	
Mixed / Multiple Ethnic Backgrounds	White and Black Caribbean	
	White and Black African	
	White and Asian	
	Any other mixed/multiple ethnic background (<i>please specify</i>):	
Asian / Asian British	Indian	
	Pakistani	
	Bangladeshi	
	Chinese	
	Any other Asian background (<i>please specify</i>):	
Black / African / Caribbean /	African	
	Caribbean	

Black British	Any other Black/African/Caribbean background (<i>please specify</i>):	
Any Other Ethnic Background	Arab	
	Any other ethnic background (<i>please specify</i>):	
Prefer not to say		

WELSH LANGUAGE

Are you Welsh speaking?

Yes: Fluently		Yes: Partly		Non Welsh Speaker	
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