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| --- | --- |
| **National Olympic Committee** |  |

**IMPORTANT:** This form duly completed and signed along with the documents indicated under “Attachments required” should be sent to Olympic Solidarity no later than **3 months before** the start of your action plan.

development plan

|  |  |
| --- | --- |
| Sport (or other) |  |
| Discipline |  |
| Name of the project (if any) |  |

CURRENT SPORT STRUCTURE

|  |
| --- |
| Summary of the current level |
|  |

|  |
| --- |
| Weak points |
|  |

|  |
| --- |
| Strong points |
|  |

|  |
| --- |
| Analysis of requirements |
|  |

ACTION AND OBJECTIVES

|  |
| --- |
| Action plan proposed |
|  |

|  |
| --- |
| Objectives / expected results |
|  |

planning

|  |  |
| --- | --- |
| Length of the programme | Start date Enter date dd/mm/yyyyEnd date Enter date dd/mm/yyyy |
| Visit(s) by expert (if staggered) | From Enter date dd/mm/yyyy To Enter date dd/mm/yyyyFrom Enter date dd/mm/yyyy To Enter date dd/mm/yyyyFrom Enter date dd/mm/yyyy To Enter date dd/mm/yyyy |

budget proposal

**N.B.:** International expert’s expenses (air ticket(s) and indemnities, etc.) **must be included** in the estimated expenditure below.

|  |  |  |
| --- | --- | --- |
| Type of expenditure | Budget (LOC) | Budget (USD) |
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|  |  |  |
|  |  |  |
| **TOTAL** |  | USD  |

|  |  |
| --- | --- |
| **Requested budget** *(if different from the estimated expenditure)* | USD  |

|  |  |
| --- | --- |
| Has your NF already submitted all the relevant technical details to its respective IF? |  |

proposed expert

|  |  |  |  |
| --- | --- | --- | --- |
| Family name |  | Given name(s) |  |
| Date of birth |  | Nationality |  |
| Gender |  | Current level |  |
| Residence (city, country) |  | Email |  |
| Telephone |  |
| Mobile |  |

Education & Diplomas

|  |  |  |
| --- | --- | --- |
| Year | Training | Diplomas awarded |
|  |  |  |
|  |  |  |
|  |  |  |

Sports Experience

|  |  |
| --- | --- |
| Year | Clubs, athletes coached, past achievements, etc. |
|  |  |
|  |  |
|  |  |

national coordinator (if already known)

|  |  |  |  |
| --- | --- | --- | --- |
| Family name |  | Given name(s) |  |
| Nationality |  | Title within the NF or NOC |  |
| Email |  | Mobile |  |

attachments required

|  |  |
| --- | --- |
| Detailed action plan |  |
| Overall and detailed budget  |  |
| Curriculum Vitae of the proposed expert (where applicable) |  |
| Acceptance letter from the expert |  |

**The National olympic committee**

I, the undersigned, President/Secretary General of the above-mentioned NOC, certify that the information provided above is true and accurate.

Stamp

Name, function (President or Secretary General) and signature: Date: