

Training Scheme for Public Sector Employees

Flexi Training Scheme 2022/2023

Application Form

Name of Athlete	
Name of Association / Federation:	
SportMalta Registration No of Association/Federation of applicant:	
Name of Club of applicant:	
SportMalta Registration No of Club of applicant:	
Sport Discipline:	

Section A:

Details of applicant's employment

Ministry										
Department										
Grade										
Scale										
Telephone (fixed line):										
Telephone (mobile no):										
E-mail of Head of Department :	@									

Days and time of work **without** the scheme:

Day:	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Working hours (from – to)							
Break time (from – to)							

If employment is on shift basis, please give details below:

I, the undersigned, declare that I have read, understood and accept the terms and conditions relating to this scheme and that all the information submitted in this application is complete and correct. Thus, I approve that the applicant applies to participate in this scheme.

Signature of Employee/Athlete's Head of Department _____

Name and Surname of Signatory: _____

Signature of Employee/Athlete's HR Manager _____

Name and Surname of Signatory: _____

Section B:
Applicant's Personal Details

Surname:															
Name:															
Identity Card No:															
Date of birth:	Day					Month					Year				
Sex:															
Address	Door Number / House Name														
	Street														
	Locality														
	Post Code														
Telephone (fixed line):															
Telephone (mobile no):															
E-mail :	@														

During the last season, were you chosen by the national association/federation to be part of the national team to represent Malta in an international competition? Please give details below.

The best performance in your career is:

Write down the discipline/s that you train and the results achieved:

Discipline	Best result ever achieved (Personal best)	Best result achieved last season (Season best)	Aims for the coming year

Write down the details of the main competitions for next season:

Dates	National/International Competitions

Choose the scheme and the criteria according to your current valid sports level:

Scheme	Select Criteria
Scheme A: up to 30 hours	<ul style="list-style-type: none"> ○ Double Individual Gold Medallist in the last edition of GSSE ○ Medallist in the last edition of European Championships, Mediterranean Games ○ Finalist* in the last edition of Olympics, Paralympics, Commonwealth Games, World Championships or any other games/ championships/ cups which are the sole event that gives the champion title of the said event to the winner. If there are no rounds, the athlete must finish in the top 15 percentile
Scheme B: up to 20 schemes	<ul style="list-style-type: none"> ○ Gold individual medallist in the last edition of GSSE ○ Finalist* in the last edition of European Championships, Mediterranean Games ○ Semi-Finalist* in the last edition of Olympics, Paralympics, Commonwealth Games, World Championships or any other games/ championships/ cups which are the sole event that gives the champion title of the said event to the winner. If there are no rounds, the athlete must finish in the top 25 percentile

	<ul style="list-style-type: none"> ○ Medallist in championships/cups with more than 20 participating countries in the event ○ Qualified by standard (not invitational card) for the next edition of Olympics, Paralympics, Commonwealth Games, World Championships or any other games/ championships/ cups which are the sole event that gives the champion title of the said event to the winner
Scheme C: up to 10 hours	<ul style="list-style-type: none"> ○ Silver individual medallist in the last edition of GSSE ○ Medallist in championships/cups with 10 or more participating countries in the event ○ Top 3 in the Maltese National Ranking with 10 or more athletes in the ranking event ○ Qualified by standard (not invitational card) for the next edition of Olympics Paralympics, Commonwealth Games, World Championships or any other games/ championships/ cups which are the sole event that gives the champion title of the said event to the winner
Scheme D: up to 5 hours	<ul style="list-style-type: none"> ○ Bronze individual medallist in the last edition of GSSE ○ Medallist in doubles/teams events in the last edition of GSSE ○ Athletes on last year's scheme who did not perform due to injury (physical/psychological/emotional) ○ Gold or Silver Medallist in the last edition of the MESA Games ○ Top 3 in the Maltese National Ranking with less than 10 athletes but more than 5 athletes in the event ○ Medallist in championships/cups with less than 10 participating countries in your event[§] ○ Qualified by standard (not invitational card) for the next edition of GSSE in the year of the games ○ Top 50 percentile in the last edition of Olympics, Paralympics, Commonwealth Games, World Championships or any other games/ championships/ cups which are the sole event that gives the champion title of the said event to the winner
Scheme E: up to 6 hours	<ul style="list-style-type: none"> ○ Earmarked national team athletes forming part of GSSE 2023 Teamsports – Basketball and Rugby 7's

*There must be a previous round

[§] Subject to vetting of the event

How many hours per week do you require? _____

Write down how the hours allocated (*52 weeks * flexi hours requested*) will be used throughout the season

<u>Month</u>	<u>Periodization</u>	<u>Flexi scheme hours</u>
<i>e.g: September 21</i>	<i>Pre-season</i>	<i>40 hours</i>
<i>August 22</i>	<i>Off-season</i>	<i>0 hours</i>
October		
November		
December		
January		
February		
March		
April		
May		
June		
July		
August		
September		
Total	<i>Not more than 52 weeks * flexi hours requested:</i>	

Write down how you intend to make use of these hours:

Day	Working hours without scheme	Normal Training time without scheme	Working hours with scheme (if granted the total number of hours requested)	Flexi Scheme extra training hours	Total training Hours (Column 3+5)
<i>e.g.: Monday</i>	<i>9am-5pm</i>	<i>6-8pm (2 hours)</i>	<i>10.30-5pm</i>	<i>7.30-9.00am (1.5hours)</i>	<i>2+1.5 = 3.5hours</i>
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					
Total hours of training					

Section C:
Details of Association/Federation

Name of Association/Federation:										
VO number										
Address	Door Number/ House Name									
	Street									
	Locality									
	Post Code									
Telephone (fixed line):										
Telephone (mobile no):										
E-mail:	@									

Section D:
Details of Coach

Surname:																	
Name:																	
Identity Card No:																	
Date of birth:	Day					Month					Year						
Address:	Door Number / House Name																
	Street																
	Locality																
	Post Code																
Telephone (fixed line):																	
Telephone (mobile no):																	
E-mail:	SPORTMALTA @																

How long have you held this position
within the National Association/Federation? _____

Coaching qualifications:

I, the undersigned, declare that I have read, understood and accept the terms and conditions relating to this scheme and that all the information submitted in this application is complete and correct.

Signature of coach

Date

Section E:**Documentation attached to this Application:**

I declare that I am attaching the documents listed below with this application:

1. Letter from applicant's HR manager stating permission and approval of the responsible Head of Department for the applicant's participation in this scheme. ☐
2. Certificates of coaching qualifications of Coach. ☐
3. A recent Police Conduct certificate. ☐
4. Documents relating to the athlete's latest performances to support the potential scheme, including a declaration that the athlete is part of the national team or has the potential to be part in the coming season. ☐

Important:

If the application is approved, every month the HR manager must submit a confirmation of the working hours away from work to train. This claim should be sent to SportMalta, who will in turn certify that the amount of hours requested have been utilized by the athlete for sport preparation purposes according to the training program which would have been established beforehand.

This scheme is applicable on the gross hourly rate of pay of the employee.

I, the undersigned, declare that I have read, understood and accept the terms and conditions relating to this scheme and that all the information submitted in this application is complete and correct.

Signature of applicant

Date