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| 1. **ATHLETE INFORMATION**
 |
| Citizenship: |  |
| Name: |  |
| Date of Birth: |  |
| Gender: |  |
| GAL Number: |  |
| Weight Division: |  |
| Contact Number: |  |
| Email: |  |
| 1. **BREAKDOWN OF THE TRAINING COSTS (USD)**

**(Please describe the projected costs to be used for training)** |
|  |
| 1. **TRAINING PLAN**

**(Please describe the training plan with the allocated scholarship)** |
|  |
| 1. **NAME AND SIGNATURE OF THE ATHLETE**
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| Name of Athlete: |  | Date &Signature: |  |
| 1. **AUTHORIZATION**
 |
| Name of President |  | Date &Signature: |  |
| 1. **SUBMISSION**
 |
| Please fill and submit this report to the WT Member Relations and Development at member@worldtaekwondo.org. |
| 1. **Qualification** (qualified applicants who satisfy one of the following four criteria)
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| * 1. Refugee athlete
	2. Para-Taekwondo athletes
	3. Athletes training at WT-recognized training centers or facilities
	4. Athletes ranked within top 50 of World Kyorugi Ranking, World Poomsae Ranking and World Para Kyorugi Ranking
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