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| 1. **ATHLETE INFORMATION**
 |
| Nationality: |  |
| 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 using the allocated scholarship)** |
|  |
| 1. **NAME AND SIGNATURE OF THE ATHLETE**
 |
| Name of Athlete: |  | Date &Signature: |  |
| 1. **AUTHORIZATION**
 |
| Name of President |  | Date &Signature: |  |
| 1. **SUBMISSION**
 |
| Please fill out the application form and submit to WT Member Relations and Development at member@worldtaekwondo.org. |
| 1. **Qualification** (qualified applicants who satisfy one of the following four criteria)
 |
| * 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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**Banking Information Form**

Please fill out this form and submit to WT Member Relations & Development Department member@worldtaekwondo.org.

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| Name of your Member National Association: |  |
| Name of Bank: |  |
| Address of Bank: |  |
| Bank Swift Code: |  |
| Account Number: |  |
| Name of Account: |  |
| Address of Account: |  |
| Intermediary Bank: |  |

\*For the region of Europe, IBAN no. should be confirmed.
\*For the region of America, Routing no. should be confirmed.

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| IBAN Number: |  |
| Routing Number: |  |