

IBS Athlete Excellence Programme

Athlete Application Form

Please note that this application form is for the IBS Athlete Excellence Program which aims to offer elite PNG athletes the opportunity to obtain educational qualifications through the IBS University Certificate, Diploma and Degree courses, which will contribute to their development as individuals and lead them into a successful professional career after their sporting career.

The due date to submit this application and supporting documents is *Friday January 2025*.

To be eligible for the IBS AEP, applicants must:

- have or must be currently representing Papua New Guinea at the international level;
- get approval from the National Sports Federation;
- have achieved a Grade 10 school certificate or equivalent if applying for a IBS Certificate Course;
- have achieved a Grade 12 school certificate or equivalent if applying for a IBS Diploma Course

This form should be submitted together with a completed IBS Application for Admission Form

GENERAL INFORMATION

1. NAME

Family Name	First Name	Middle Name
-------------	------------	-------------

2. CONTACT DETAILS

Postal Address:			
Mobile No.:		Landline No.:	
Email:		Facebook/Instagram:	

3. PLEASE INDICATED WHAT TYPE OF SCHOLARSHIP YOU ARE APPLYING FOR: INDICATE COURSE AS WELL.

CERTIFICATE	DIPLOMA	DEGREE
<input type="checkbox"/> Certificate 3 in Information Technology	<input type="checkbox"/> Diploma in Information Technology	<input type="checkbox"/> Bachelor of Information Technology
<input type="checkbox"/> Certificate 4 in Information Technology	<input type="checkbox"/> Online Diploma in Information Technology	<input type="checkbox"/> Bachelor of Information Technology with a Major in Digital Interaction and User Experience
<input type="checkbox"/> Certificate 3 in Business	<input type="checkbox"/> Online Advanced Diploma in Information Technology	<input type="checkbox"/> Bachelor of Business Management
<input type="checkbox"/> Certificate 4 in Business	<input type="checkbox"/> Online Diploma in Business	<input type="checkbox"/> Bachelor of Business with a major in Management



- | | | |
|---|---|--|
| <input type="checkbox"/> Certificate 3 in Accounting | <input type="checkbox"/> Online Advanced Diploma in Business | <input type="checkbox"/> Bachelor of Business with a major in Accounting |
| <input type="checkbox"/> Certificate 4 in Accounting | <input type="checkbox"/> Diploma in Business and Management | <input type="checkbox"/> Bachelor of Accounting and Finance Management |
| <input type="checkbox"/> Certificate 4 in Human Resources | <input type="checkbox"/> Diploma in Economics and Development Studies | <input type="checkbox"/> Bachelor of Economics and Development Studies |
| | <input type="checkbox"/> Online Diploma in Economics | |
| | <input type="checkbox"/> Online Advanced Diploma in Economics | |
| | <input type="checkbox"/> Online Diploma in Accounting | |

4. BRIEFLY DESCRIBE YOUR SPORTING HISTORY, INDICATING THE SPORT YOU HAVE/ARE PLAYING, THE TIMES YOU HAVE REPRESENTED PNG AND THE HIGHEST LEVEL OF ACHIEVEMENT YOU HAVE REACHED.

5. BRIEFLY DESCRIBE WHY YOU ARE APPLYING FOR THE IBS ATHLETES SCHOLARSHIP PROGRAMME (**Not to exceed 75 words**).

6. FUTURE PLANS

a. Describe the CAREER GOALS you have set yourself within the next 5 years. (Not to exceed 75 words)
b. Describe the SPORTING GOALS you have set yourself within the next 5 years. (Not to exceed 75 words)
c. Describe the PERSONAL GOALS you have set yourself within the next 5 years. (Not to exceed 75 words)

7. SUPPORT TO SPORTS: (Describe the type of support you are willing to give to your individual sport or sports in general after the completion of study). (**Not to exceed 75 words**)

OCCUPATIONAL EXPERIENCE (IF APPLICABLE)

8. OCCUPATIONAL EXPERIENCE: (List positions held, beginning with the most recent employment, if any.)

	Employer Details	Title/ Type of work	Period of Employment (month & year)	
			From	To
1.	Address:			



2.	Name:				
	Address:				
3.	Name:				
	Address:				

Signature of Athlete:

Date:

Endorsement from National Federation:

Name:

Position:

Signature: _____

Date: ____ / ____ / 20__

Received by PNGOC

Date: ____ / ____ / 202__ Time: ____:____ am / pm Name: _____

Endorsement from PNG Olympic Committee:

PNG Olympic Committee have reviewed _____ (applicant's name) application and sees him/her as a suitable recipient of the IBSU Scholarship, under the Athlete Excellence Program.

ENDORSED

NOT ENDORSED

Name:	
Signature:	

Position:	
Date:	



APPLICATION FORM – IBS ATHLETE EXCELLENCE PROGRAMME

