



OLYMPIC SCHOLARSHIPS FOR ATHLETES "SOCHI 2014"
EVALUATION FORM

National Olympic Committee

Period from Enter date dd/mm/yyyy to Enter date dd/mm/yyyy

ATHLETE

Family Name		Given Name(s)	
Sport		Discipline	
Name of coach			

TRAINING (DESCRIPTION, LOCATION AND DATES)

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COMPETITION RESULTS

Dates		Competition	Venue	Results
From	To			

SOCHI OLYMPIC WINTER GAMES QUALIFICATION STATUS

Has the scholarship holder qualified for the Sochi Olympic Winter Games? Yes No

If yes: Competition		Date		Venue	
Result					
If no: Next possibility		Date		Venue	

MEDICAL

Has the athlete suffered any injuries or medical problems? If so, please describe. Yes No

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COMMENTS

Athlete	
Coach	



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FINANCIAL STATEMENT: MONTHLY SCHOLARSHIP DISTRIBUTION

- Please refer to the athlete/NF/NOC contract and complete and sign the financial statement below.
 - Statements without the valid signatures of all parties will not be accepted.
 - The NOC should keep an accurate account of all financial transactions that have occurred.
 - Olympic Solidarity reserves the right to request any additional financial documentation as need be.

Description of Expenditure	Direct beneficiary	Expenditure	Expenditure
Coaching costs, transport, competition costs, etc.	Athlete, coach.	Local currency	Exchange rate: 1 USD = ...
Total for month of			USD
Total for month of			USD
Total for month of			USD
Total for month of			USD
GRAND TOTAL			USD

I, the undersigned ATHLETE, acknowledge that I have benefited from the monthly funds of the Olympic scholarship as listed above and hereby certify that the information in this report is a true and honest representation of the use of the Olympic scholarship funds.

Name and signature: Date:

I, the undersigned, on behalf of the **National Federation of** _____ hereby certify that the information provided in this report is a true and honest representation of the use of the Olympic scholarship funds for the athlete concerned.

Name, function and signature: Date:

I, the undersigned, President/Secretary General, on behalf of the **NOC of** _____ hereby certify that the information provided in this report is a true and honest representation of the use of the Olympic scholarship funds for the athlete concerned and that the NOC takes full responsibility for the financial accuracy of this statement:





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

Date:

This form is also available on NOCnet <http://extranet.olympic.org/nocnet>