

National Olympic Committee			
IMPORTANT: in order for this request to be taken into consideration, this form, duly completed and signed, and the documents mentioned in the "Attachements required" item, should be sent to Olympic Solidarity <i>in electronic format</i> , at the very latest three (3) months prior to the start of your action plan.			
DEVELOPMENT PLAN			
Sport			
Discipline / specialisation			
Current sport structure (description, strong points, weak points a	nd analysis of requirements)		
Action plan proposed			
Objectives / expected results			
Cojediives / Copedica results			



PLANNING

Length of the programme	Start date End date Total duration:	Enter date dd/mm/yyyy Enter date dd/mm/yyyy months
Visit by expert, if staggered	From Enter date of From Enter date of Enter	dd/mm/yyyy To Enter date dd/mm/yyyy

BUDGET PROPOSAL

N.B.: we remind you that the international expert's expenses – air ticket(s) and indemnities - **must be included** in the estimated expenditure below.

Estimated expenditure	Budget	Budget
(Please add rows if necessary)	(Local currency)	(USD)
(* ************************************	(Local carrolloy)	(002)
Total		USD
Requested budget (if different from the estimated expenditure)		USD



PROPOSED EXPERT

The NOC has the possibility to propose an expert to run this programme. In this event, **the Curriculum Vitae** of the expert must be provided to Olympic Solidarity, which will submit the file to the International Federation concerned, for approval.

Family name		Given name			
Date of birth		Nationality			
Correspondence		Gender	Male	Female	
address		Email			
		Telephone			
		Fax			
Current level					
Courses followed / d	iplomas obtained				
Sports experience (clubs, athletes coached, past achievements, etc.)					
NATIONAL COORDINATOR (if already known)					
Family name		Given name			
Email		Telephone			



ATTACHMENTS REQUIRED

Detailed action plan	
Overall and detailed budget with supporting documents	
Acceptance letter from the expert	
Curriculum Vitae of the proposed expert (where applicable)	

THE NATIONAL OLYMPIC COMMITTEE					
I, the undersigned, President/Secretary General of the information provided above is true and accurate.	above-mentioned	NOC,	certify	that	the
Name, function (President or Secretary General) and signature:	Date:		S	tamp	

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