



**2021 Golf NSW High Performance Program
Athlete Application Form**
Applications Close Friday March 5th

APPLICANTS DETAILS

FULL NAME: _____

ADDRESS: _____

_____ POSTCODE: _____

EMAIL: _____

HOME PHONE: _____ MOBILE: _____

DATE OF BIRTH: _____

GOLF CLUB MEMBERSHIP/S: _____

GOLFLINK #: _____

HIGH SCHOOL YOU ATTEND/ED: _____

WHAT YEAR ARE YOU IN/GRADUATED/LEFT _____

COACHES NAME: _____

COACHES CONTACT PHONE NUMBER/EMAIL: _____

CURRENT WORK/STUDY (if not in high school): _____

HOW MANY HOUR PER WEEK ARE WORK/STUDY COMMITMENTS (non-high school): _____

Please answer the following questions.

1. Please list your best 5 tournament results over the last 18 months.

2. What are your performance objectives (i.e. tournament results/ranking goals) for the next 1-2 years? Please list at least 5 objectives.

3. How do you believe the Golf NSW High Performance Program can assist you in achieving these objectives?

4. What do you consider are your strongest personal attributes?

5. What do you consider to be your highest development priorities in 2021. (i.e. gaps in your game that you consider require sustained improvement to take your game to the next level)? Please list up to 5 “big picture” priorities (e.g. get physically stronger, increase my distance, be better at handling pressure, have more structure in my daily/weekly routines etc.)

6. Briefly describe a major challenge you have faced on your golfing development journey so far. This could be an on or an off-course challenge. Why was this a major challenge in your opinion and describe what you did to overcome it or how are you currently addressing it?

7. Please provide details (name, phone, email) of any service providers (i.e. physio, strength and conditioning coach, mind coach etc.) that you currently utilise as part of your development?

8. What does your golf pathway look like in the next 3-5 years?

Application Declaration

- . If chosen I will give 100% commitment to the program
- . I will give respect to all service providers, coaches and squad members
- . I will have a professional attitude to training
- . I will work as part of a team at all times
- . I will adhere to the Golf NSW Code of Conduct and other relevant policies

I declare the information in this application is true and correct to the best of my knowledge and understand the terms of the application.

Signature of Applicant _____

(If applicant is under 18 years of age)

Signature of Parent/Guardian _____

Parents Email: _____

Parents Mobile: _____

APPLICATIONS CLOSE FRIDAY March 5th, 2021

**Application Forms are to be emailed to the
Golf NSW High Performance Manager;**

Khan Pullen at

khan.pullen@golfnsw.org.au