

WORLD ATHLETICS
COACHES'
COMMISSION
MEMBERS
NOMINATION FORM

Coaches' Commission Members Nomination Form

The Nomination Form must be received by the Nominations Panel by no later than **30 September 2025 (23:59 CET)**. This deadline will be strictly enforced. Nomination Forms must be sent by email to nominations.panel@worldathletics.org.

In addition to this form, Applicants must submit by latest **30 September 2025**:

- a letter detailing the Applicant's suitability for a Commission member position, which clearly outlines their skills and experience, how they will make a contribution to the Commission and reasons for applying; and
- a CV with two referees.

Please type in details in the highlighted fields

1. INFORMATION ABOUT THE APPLICANT

1.1. POSITION(S) SOUGHT

Please tick one (1) Commission position

World Athletics COACHES' Commission

MEMBER

CHAIRPERSON

1.2. PERSONAL INFORMATION

Title

Family Name

Given Name

Gender

Date of Birth (dd/mm/yyyy)

Nationality

Preferred Language

1.3. APPLICANT CONTACT INFORMATION

House/Apartment No.

Road/Street

Town/City

County/State

Country

Post/zip code

Mobile

Email

2. ENDORSEMENT BY MEMBER FEDERATION OR AREA ASSOCIATION (OPTIONAL)

The [NAME OF MEMBER FEDERATION/ AREA ASSOCIATION] endorses the application by [NAME OF APPLICANT] for a position as a World Athletics Coaches' Commission Member.

2.1. MEMBER FEDERATION/ AREA ASSOCIATION INFORMATION

Please state the Member Federation or Area Association which is endorsing the Applicant.

Name of Member Federation/Area Association:

Name and contact details of person signing your Application Form on behalf of the Member Federation/Area Association:

Position of person signing your Form on behalf of the Member Federation/Area Association:

List any current or past positions (with date(s)) of the Applicant in the Member Federation/Area Association:

2.2. SIGNATURES

2.2.1. APPLICANT SIGNATURE

I DECLARE that the information included in this Application Form concerning my application for a position as a World Athletics Coaches' Commission Member is accurate and complete.

I confirm I have read, understood and will comply with World Athletics Constitution and its Rules, including the Integrity Code of Conduct. (please tick if true)

I understand that World Athletics will hold and process my personal data in order to fulfil the legitimate interests of World Athletics in considering my application, which, if successful,

may include publishing personal data on the World Athletics website and/or otherwise providing this data to Member Federations and other interested parties around the world, and I consent to World Athletics doing so.

(please tick if true)

Please fill in and sign

Signature*

Name

Date (dd/mm/yyyy)

Place (Town/City, Country)

*A digital signature is acceptable

2.2.2. MEMBER FEDERATION / AREA ASSOCIATION SIGNATURE (only complete if Application is to be endorsed)

As the most senior officer of the Member Federation or Area Association*, I **confirm** that the Member Federation/Area Association, by resolution of its Board, Executive Committee or equivalent body, endorses the application of this Applicant.

*Where the Applicant is the most senior officer of the Member Federation or Area Association, this must be signed by the next most senior officer of the Member Federation or Area Association.

Please fill in and sign if required.

Signature**

Name

Date (dd/mm/yyyy)

Place (Town/City, Country)

**A digital signature is acceptable

Member Federation/ Area Association Stamp (if available)

