



EXPRESSION OF INTEREST FORM

This form will be used to assess the athlete's eligibility for the Diploma in Sporting Excellence (DISE) programme. Please complete and return to: DISE@britishjudo.org.uk or mail to: DISE, British Judo Association, Floor 1, Kudhail House, 238 Birmingham Road, Great Barr, B43 7AH

| ATHLETE | |
|--------------------------------|----------------------------|
| Name: | Date of Birth: |
| Address: | Email Address: |
| | Telephone Number: |
| Post Code: | |
| Club: | Mobile Number: |
| Coach Name: | |
| Coach Telephone Number: | |
| Coach Email Address: | |
| Grade: | BJA Licence Number: |

| PARENT/GUARDIAN | |
|--------------------------------------|----------------------------------|
| Full Name of Parent/Guardian: | Relationship: |
| Home Address: | Contact Telephone Number: |
| Post Code: | |

| EDUCATION | |
|------------------------|----------------------|
| School/College: | Head Teacher: |
| Address: | Head of Year: |
| Post Code: | |

PROPOSED POST-16 EDUCATION:

| | |
|------------------------|-----------------------|
| School/College: | State/Private: |
| Address: | |
| Post Code: | |

QUALIFICATIONS

| From | To | Subject and Level | Examinations taken or to be taken | Results/ Grades | Date Gained |
|--|---------------|--------------------------|--|------------------------|--------------------|
| Mth/Yr | Mth/Yr | | | | |
| / | / | Maths GCSE | | | / |
| / | / | English GCSE | | | / |
| / | / | | | | / |
| / | / | | | | / |
| / | / | | | | / |
| / | / | | | | / |
| / | / | | | | / |
| / | / | | | | / |
| Please continue on a separate sheet if necessary | | | | | |

DISE Providers

| Location: | Please tick: |
|--|---------------------|
| Camberley Judo Club | |
| Comberton Judo Club, Cambridge | |
| Kendal Judo Club | |
| Redbridge Judo Club | |
| University of Bath | |
| University of Wolverhampton (Walsall Campus) | |

Judoka Signature:

Date:

Full name of Parent or Guardian (If under 18):

Signature:

Date: