



UK Coaching Certificate Registration Form

UKCC Course Detail	SQUASH LEVEL						
Course Date(s)				Course Venue			
Course Co-ordinator	Liza Baillie, Coach Education and Development Manager						
Expected Completion Date	Month				Year		
*Title (Mr, Mrs, Ms etc)							
*Candidate Name (to appear on certificate)							
Maiden Name (if applicable)							
Date of Birth				Age			
Nationality							
Gender (✓)	Male				Female		
Candidate Home Address							
Post Code							
Telephone Number(s)	Home:						
	Work:						
	Mobile:						
Previous Address							
Post Code							
*Email Address							
Current Coaching Qualification	e.g. Eng Squash L2						
In your coaching capacity are you: (please tick)	Paid		Full Time		Part Time		Volunteer
Do you have a Scottish Qualifications Authority (SQA) Scottish Candidate Number (SCN)? (✓)	Yes (please fill out below if SCN is known)				No		
Scottish Candidate Number (SCN = 9 digit)							
<p>SCN numbers have been allocated by the SQA since 1979, if you feel that you have previously been allocated a SCN by the SQA, your number details can be generated for you by calling the SQA helpdesk on 0845 279 1000. Please inform the Course Co-ordinator as soon as possible once your SCN becomes known to you.</p>							
Name of your most recent training provider of SQA qualifications (eg Secondary School, College, University, National Governing Body, Employer, None)							
<p>By signing below, I, the candidate, agree to give permission for and acknowledge the following: Personal details will need to be gathered from candidates to allow for registration and certification for your award with the Scottish Qualification Authority. This data transfer will at no time encroach on your civil rights as detailed in the Data Protection Act (1998). Please also note that on completion of your course, SQA candidate certificates will be opened and copied by administration staff for quality assurance purposes prior to them being forwarded to you.</p>							
Signed:				Date:			

FOR OFFICE USE ONLY:

Date Received	Date Candidate filed	Date units filed	Date Green
Notes	Notes	Notes	Notes



COACH WORKFORCE INFORMATION	
Scottish Squash is working to identify and profile its coaching workforce throughout Scotland. This shall allow us to identify who our coaches are, where they work and what the most appropriate coach education opportunities and support mechanisms for these coaches are. Please help us by answering the following questions:	
AREA	REPLY
*Current club – where you play and/or coach (please specify)	
I am interested in completing the next level of UKCC coaching course (if no, please specify why)	Yes/No (please specify)
*I am currently coaching: (please specify) <ul style="list-style-type: none"> Age group Level of ability Number of hours per week 	
I currently receive payment for my coaching with the club and/or individuals	Club = Yes/No (please specify) Individuals = Yes/No
The three areas I would be most interested in receiving further coaching information on are..... (These may be formal UKCC or Mini Squash courses or areas of interest e.g. psychology, nutrition, disability sport etc.)	1. 2. 3.

Disability – for the definition of Disability please see our website -			
Are you registered as having a disability? Yes / No		Are you deaf/hearing impaired? Yes / No	
What is your Ethnic Group? (please tick below)			
<input type="checkbox"/> White	<input type="checkbox"/> Asian, Asian Scottish or Asian British	<input type="checkbox"/> Black, Black Scottish or Black British	<input type="checkbox"/> Mixed and Any Other Background
<input type="checkbox"/> Scottish	<input type="checkbox"/> Indian	<input type="checkbox"/> Caribbean	<input type="checkbox"/> Any mixed background
<input type="checkbox"/> Other British	<input type="checkbox"/> Pakistani	<input type="checkbox"/> African	
<input type="checkbox"/> Irish	<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Any other black background	<input type="checkbox"/> Any other background
<input type="checkbox"/> Any other white background	<input type="checkbox"/> Chinese		
	<input type="checkbox"/> Any other Asian background		

I hereby give permission for all of the above information to be kept on file by Scottish Squash and its key partners for monitoring & programme development purposes. I acknowledge that I may be contacted if a relevant coach education and/or development opportunity arises.

I also give/do not give (*delete as appropriate*) my permission any photographs taken on the course to be used for promotional purposes and for the information marked with an asterisk * to be given to clubs/individuals/partners looking for coaches or to be published, in future, within a coaching list which may be on the Scottish Squash or partner websites.

Signed: _____ Date: _____

Data Protection

The information on this form will be held in accordance with the Data Protection Act 1998. The data will be used for Scottish Squash administration purposes and grouped to provide statistical reports required by sportscotland and other relevant agencies. In the event of an insurance claim relevant information may be passed onto an insuring agency.

Please complete and sign both pages of this form and return it, with appropriate payment, to Scottish Squash, Caledonia House, 1 Redheughs Rigg, South Gyle, Edinburgh, EH12 9DQ

