

BV-07

**CEV BEACH VOLLEYBALL
CANDIDATE TECHNICAL
SUPERVISOR APPLICATION**



The National Volleyball Federation of _____ nominates the following person as a CEV Beach Volleyball Candidate Technical Supervisor.

PERSONAL DETAILS

Surname, First Name: _____

Home Address: _____

Contact details Email _____ Mobile _____

Landline (business/home) _____

Profession: _____

Date and Place of Birth: _____

Gender: Male Female Nationality: _____

Closest International Airport: _____

EDUCATIONAL BACKGROUND (Schools, Diplomas/Degrees obtained, etc.)

LANGUAGE SKILLS

Please check X the appropriate box (1=very poor, 5=very good)

	spoken					written				
	1	2	3	4	5	1	2	3	4	5
English										

POSITION(S) HELD WITHIN THE NATIONAL VOLLEYBALL FEDERATION

BV-07

**CEV BEACH VOLLEYBALL
CANDIDATE TECHNICAL
SUPERVISOR APPLICATION**



POSITION(S) HELD WITHIN OTHER SPORTS ORGANIZATIONS

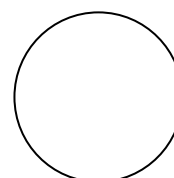
**EXPERIENCE IN BEACH VOLLEYBALL
(Technical Supervisor, Organiser, Tournament/Competition Director, etc.)**

Name (printed) and signature of the Candidate

Name of the President and/or General Secretary (printed)

Signature of the President and/or General Secretary

Date and Venue



Seal of the National Federation

The undersigned confirm that the candidate possesses the necessary skills and expertise to apply for candidature as Technical Supervisor in CEV Beach Volleyball competitions.