**PATHWAY DEVELOPMENT CENTRE STATUS**

APPLICATION FORM 2023-2024

Once complete, please return the form to: Emma Vickers (Head of Pathway Development – emma.vickers@tabletennisengland.co.uk).

**SECTION 1 – CURRENT INFORMATION ABOUT YOUR ENVIRONMENT**

1. Name of club/environment applying to become a Pathway Development Centre (PDC):

|  |  |
| --- | --- |
| **Name of Club/environment:** |  |
| **Address of venue:** |  |
| **Main contact number (email and phone number):** |  |
| **Name of person(s) completing the form and role within the environment:** |  |

2. Please use the space below to tell us why you are motivated to become a Table Tennis England supported PDC.

3. Please use the space below to tell us about your facility that you plan to run the PDC out of, including size, access, and equipment.

4. Please outline your current coaching staff within the proposed PDC environment (please include coaching credentials, e.g., coaching qualifications, safeguarding, DBS).

5. If applicable, please provide an outline of the current junior pathway within your club/environment (e.g., beginner, intermediate, advanced sessions), and the level of the players. Please ensure that you include details of any current activity in the environment with players under the age of 9.

6. Please provide a full overview of the table tennis activities that happen in your club/environment, and timings using the table below (outline if this changes across the year, e.g., within the table tennis season). Consider all club training across different ages, levels, and leagues etc.

|  |  |
| --- | --- |
| **Day** | **Activities & Times** |
| **Monday** |  |
| **Tuesday** |  |
| **Wednesday** |  |
| **Thursday** |  |
| **Friday** |  |
| **Saturday** |  |
| **Sunday** |  |

7. Please provide details of neighbouring clubs/table tennis environments that you currently work or collaborate with (including what this entails and any key contacts).

8. Please outline localised events/competitions that players within your environment access to support their development.

**SECTION 2 – PATHWAY DEVELOPMENT CENTRE PROPOSED DELIVERY**

9. Please outline the proposed delivery schedule of the recommended 10 hours of delivery for the PDC, including session days & times.

 Please note, you must evidence how this is **additional** to current delivery you have detailed in question 6.

|  |  |
| --- | --- |
| **Day** | **PDC Activities & Times** |
| **Monday** |  |
| **Tuesday** |  |
| **Wednesday** |  |
| **Thursday** |  |
| **Friday** |  |
| **Saturday** |  |
| **Sunday** |  |

10. Please outline the proposed coach(es) that would lead the PDC.

|  |  |
| --- | --- |
| **Name of proposed lead PDC coach & previous experience** |  |
| **Names of any proposed supporting PDC coaches & previous experience** |  |

11. Please provide details regarding how you plan to create a ‘feeder’ system into the PDC environment (e.g., through connection with neighbouring clubs, outreach work with schools/TT Kidz, U8 club activities). Please note, there will be support with this from Table Tennis England.

12. Please provide details on how you plan to provide a progressive, high-intensity training environment for the players within the PDC (and how this may vary for each group - early development & pathway group). Consider aspects such as:

* Multi-ball
* Fundamental movement skills/physical training (TTE will support this aspect)
* Sparring partners (including ideas on who these might be)
* Matchplay
* Any wider support

13. Please outline the proposed lead (and support if applicable) coach’s commitment to continued professional development as a coach. This may include undertaking development opportunities that Table Tennis England put on (e.g., workshops, mentoring from a national coach, and opportunities to attend England/GB national training activity).

14. Please outline any proposed ideas for the delivery of coach development opportunities within the PDC environment (e.g., availability to hire the space on weekends, any specialist areas that could be core coach development topics).

**SECTION 3 – FINANCIAL MODEL**

We understand that not every PDC will operate the same, and instead a bespoke financial model will allow each PDC to utilise the funding in a way that best suits their individual environment needs. Whilst we strongly encourage that costs are allocated to the ‘delivery’ as aspect of the PDC (e.g., coach costs), we recognise that use of funds may vary.

15. Please provide a detailed breakdown around how you plan to use the £12,000 provided by Table Tennis England for the PDC year.

***In year 1, as the PDC will be operational mid-year, costs will be made pro-rata based on when the PDC is active. However, please consider costs related to how you would plan to use the funds across a whole 1-year period (April to April).***

Examples of utilisation of resources are included below:

|  |  |  |
| --- | --- | --- |
| **Area** | **Cost** | **Detailed breakdown/further information (e.g., hours)** |
| **Lead Coach** |  |  |
| **Support coach(es)** |  |  |
| **Facilities/utilities** |  |  |
| **Equipment**  |  |  |
| **Sparring partners** |  |  |
| **Outreach support (e.g., talent ID in wider environments)** |  |  |
| **Other** |  |  |

16. Consider how you plan to use the PDC to generate sustained income (e.g., player costs per session), and how you plan to use this income.

17. Would you be willing to match fund or input funds from your environment to secure a full-time coach on a services contract? *(Note: this is not essential to be a PDC)*

|  |  |
| --- | --- |
| YES | NO |

Details (please leave if N/A):

**SECTION 4 – SUPPORTING INFORMATION**

18. Please provide any details of supporting documents that you have included alongside your application.

|  |  |
| --- | --- |
| **Document** | **Information** |
|  |  |
|  |  |
|  |  |

19. Please also use the space below to detail any further information that you feel is relevant to your application. Please also use this section to outline any concerns you have, or further support you feel would be valuable from Table Tennis England.

**APPLICANT NAME:**

**DATE:**

**SIGNATURE:**