NCCP CCI-T2T Coaching Experience Form



NCCP CC #:	Last Name:		
First Name:	Street: Prov.:		
City:			
Postal Code:	Tel:	Email:	
Date of Birth (d/m/y):		Male or Female (circle one)	English or French (circle one)
 Complete one season on dryland and on-snow minimum 			nours including preparation time; ge of development.
Beginning date:		Ending date:	
Receive a satisfactory e comments from skiers a			ad Coach) who has gathered
			udes athletes in the T2T stage of Coach (P/TCE Assignment).
Date and location of car	np:		
Please sign the following SDP Programmer, Club Ex		ive it verified by a leade	er from your ski club (Head Coach,
I, requirements for cross-cou	ntry skiing.	have completed	the NCCP CCI-T2T experience
Date	Sig	nature of Applicant	
I verify that experience requirements for	or cross-country s	kiing.	s completed the NCCP CCI-T2T
Date	Sig	nature of Club Official	

Please forward to the Cross Country BC Office at: #106 – 3003-30th St., Vernon, BC V1T 9J5, or programs@crosscountrybc.ca.

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