

PROGRAM COMPLETION FORM

I, as the representative for_ Association, confirm that h		
		ACE program as indicated below:
Coaching course/program	Hours Required	Documentation of completion
Basketball Australia Community Coach Accreditation Online Assessment	1hr	Basketball Australia Certificate Attach copy with form
SA Country Workshop Attendance	1.5hrs	Signature of SA Country Basketball representative
Coaching at Aussie Hoops or equivalent mini hoops clinics	1hr per week for 2 terms (20 hrs)	Signature of Basketball Association representative
Basketball Australia Club Coach Accreditation Online Assessment, clinic and clinic assessment	8 hrs	Basketball Australia Certificate Attach copy with form
Coaching at Community Development Program or coaching for a team	1.5hrs per week for two terms (30 hrs)	Signature of Basketball Association representative
Student name:		
Student signature:		
Date:		
Basketball association represe	entative name	:
Sianature:		

Date: ______Association name: _____