	SNOW AUSTRALIA	- INDIVIDUA	L PERFORMANCE F	PLAN (IPP)				
	ATH	ILETE & PROC	GRAM DETAILS					
Athlete Name:	Date of Birth (DD/MM/YY):		Club / Program					
Sport:	Resort:			SNOW AUSTRALIA				
Athlete Contact Email:	Parent/ Guardian (If under 18):		Parent/ Guardian Email:	AUSTRALIA				
PARA ATHLETES ONLY								
Previous Classification/s:		Sport::						
ATHLETE CAREER & EDUCATION								
Are you currently undertaking high school or further studies?		Details:						
School/ University:		Course:						
Do you have future career/ education plan?		Details:						
What are your plans to career wise or persona sport?								
	C	COACH & SER	VICES TEAM					
Coach name:		Contact Email:		Contact Phone:				
Strength & Conditioning coach:		Contact Email:		Contact Phone:				
Physiotherapist:		Contact Email:		Contact Phone:				
Sport Psychology:		Contact Email:		Contact Phone:				
BEST PAST PERFORMANCES								
Please list your top 2 career performances:								
Event 1:		Result:		Date:				
Event 2:		Result:		Date:				

YEAR TRAINING CELENDAR								
	Location:	Target/ Objective:	Comments:	Status:				
July								
August								
September								
October								
November								
December								
January								
February								
March								
April								
Мау								
June								
MAIN FOCUS FOR CHANGE / IMPROVEMENT								
Area for	Strategies and Actions to achieve	Measures and Timelines:	Comments:	Status:				
improvement:	improvement:							