



INSTRUCTOR QUALIFICATION – APPLICATION & VERIFICATION FORM

APPLICANT DETAILS

Full Name:

Date of Birth:

TCUK eCard Number:

Club:

Black Belt Grade:

Date Grade Achieved:

Assistant Instructor Qualification Date:

ELIGIBILITY

- Age 18 or above
 - Holds TCUK Assistant Instructor Qualification or recognised equivalent
 - Holds a recognised Black Belt Degree Certificate
 - Meets any additional requirements established by TCUK
 - Holds an Enhanced DBS Certificate where required
-

REQUIRED LEARNING (EVIDENCE ATTACHED)

- BMABA Level 2 Instructor
 - BMABA Lead Safeguarding
 - BMABA Martial Arts SENCO
 - Knife Crime and Serious Youth Violence Awareness
 - Trauma-Informed Coaching
 - Black Belt Degree Certificate
-

INSTRUCTIONAL EXPERIENCE

Active Service Supporting a Recognised Instructor:

From: _____

To: _____

Total Period: _____

Club(s): _____

Current Instructional Responsibilities:

VERIFICATION

I confirm that the applicant:

- Has completed the required learning
- Has actively supported instruction for a period of not less than 12 months
- Demonstrates appropriate instructional competence
- Demonstrates professional leadership
- Demonstrates safe and inclusive practice
- Demonstrates readiness to operate as a TCUK Instructor

I recommend that the applicant be awarded the TCUK Instructor Qualification.

Instructor Name:

TCUK eCard Number:

Club:

Signature: _____

Date: _____

APPLICANT DECLARATION

I confirm that the information provided in this application is accurate and complete.

Applicant Signature: _____

Date: _____

TCUK QUALIFICATION RATIFICATION

Date Received:

Checked By:

Learning Evidence Verified:

Qualification Approved:

Qualification Recorded:

Certificate Issued:

Signature: _____

Date: _____