



ADF ADAPTIVE SPORTS PROGRAM

EXPRESSION OF INTEREST

Current Serving Member

INVICTUS
AUSTRALIA

The Australian Defence Force (ADF) Adaptive Sports Program is a joint program run with Invictus Australia for current and former serving wounded, injured and ill members of the ADF. The program assists with participants rehabilitation and recovery through sport and reintegration back into the workplace or community. The program also promotes the power of sport to the broader community. This EOI is for the 2024 Warrior Games in the USA, and/or Invictus Games Canada 2025.

EOI closes 15 December 2023 and should be sent to adf.asp@defence.gov.au

This form may be used for any domestic or international Adaptive Sport activity.

This form is an Expression of Interest only. Your attendance at any activity will be confirmed in writing.

Privacy Statement

The ADFASP resides within the Department of Defence. The ADFASP conducts sporting activities for Wounded, Injured and Ill (WII) personnel in accordance with Defence policy. The ADFASP recognises and respects your privacy and is committed to the Australian Privacy Principles set out in the Privacy Act 1988 (Cth) and manages data records in accordance with Privacy Principles, as detailed below.

How your information will be collected and to whom it will be disclosed

The EOI is an assessment of your suitability to take part in Adaptive Sporting activities and as such, requires the collection of personal data. This is done in accordance with the Australian Privacy Principles <http://www.oaic.gov.au>

Key stakeholders who will be privy to your information are:

- you directly
- Service headquarters, CMA and/or Joint Health Command
- ASP ADF medical staff and/or
- Defence data management systems.
- Invictus Australia

Your personal information will be collected by ADFASP to:

- ensure you meet the medical, Service / representational criteria to take part in ADFASP activities;
- assist in the assessment of and to monitor your ongoing suitability to take part in ADFASP activities;
- for the purpose of general control and administration by ADFASP staff;
- to clarify your medical status; and/or
- to assist in the assessing of your requirements while taking part in ADFASP activities

The ADFASP will not use or disclose your personal information to any other person or organisation, other than those listed above, unless:

- it would reasonably be expected by you that such a disclosure would occur and the disclosure is related to the ADFASP activity in which you are involved; and/or
- you agree to your details being released to a Member of Parliament (MP) should it be requested by the office of that MP for contact purposes only; and/or
- you agree to your details being provided to media (through ADF Public Affairs Officer) upon request; and/or
- A 'permitted general situation' exists in relation to the use or disclosure of the information.

Note: A 'permitted general situation' is defined in the Privacy Act 1988 (Cth).

Form Completion Guidance

This form can be completed electronically or printed in hard copy. Adobe Acrobat Reader is the recommended Application to complete this form. Applicants are to complete Part one, then forward to your Medical Practitioner to complete Part two. Upon completion of all sections, please forward the EOI to adf.asp@defence.gov.au.

I have read, understood, and agree to the terms as detailed above. -

I give permission for ADFASP staff to conduct a service history check. -

Signature:

Date:



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Note: Unlike many traditional sports, the Adaptive Sports Program is focused on recovery, rehabilitation and reintegration following physical and psychological injury or illness. Such a focus brings a unique set of challenges including but not limited to a reduced focus on performance or outcomes such as medals.

Indicate events you would like to be considered for:		
USA Warrior Games (Florida June 24)		
Invictus Games (Canada Feb 25)		
Domestic events		
Sport information		
Nominate your sporting preferences		
Sport	1 - 12	comments
Archery (recurve and compound) (Warrior Games only)		
Athletics (track and field. ambulant and chair) (Warrior Games only)		
Cycling (road bike, recumbent bike, hand cycle) (Warrior Games only)		
Shooting (air rifle/pistol) (Warrior Games only)		
Indoor rowing (one minute sprint, four minute endurance)		
Power lifting (bench press) (Warrior Games only)		
Golf (Warrior Games only)		
Sitting volleyball		
Swimming		
Wheelchair basketball		
Wheelchair rugby		
Winter disciplines (Alpine Skiing & Snowboarding, Skeleton, Nordic Skiing, Wheelchair Curling) (Invictus Games only)		



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Part One - To be completed by applicant (NOTE: Notify ADFASP of any changes)

Employee ID	Rank	Family name	Home unit	Date of birth
First name			Forecast discharge date (if applicable)	SERCAT
Residential address				
Primary email address			Contact number:	
Service history (include current role)				
Medical category	DVA Reference Number (if applicable)			
List any previous Adaptive Sport events you have participated in:				
List any sports/clubs or associations you are currently involved in (including level):				



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Provide a personal statement outlining how this activity will support your ongoing recovery, rehabilitation or reintegration goals:

Are you able commit to attending Adaptive Sports events including team camps, 1-4 March, 3-6 May and 17 June through to the Warrior Games 22-30 June 2024, and return travel arriving 3 July? Invictus Games dates and pre camps have not been finalised but will follow a similar format.

Do you have domestic or work responsibilities that could impact your participation?

It is expected that at times participants share accommodation with other participants. Please raise any rooming requirements and concerns further during your selection interview.

Signature:

Date:



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Part Two - To be completed by applicant's Unit Supervisor and Unit Commander

Unit supervisor statement

Employee ID	Rank	Family name	Given name

Please answer below:

Has the member made a positive effort towards rehabilitation?	
Will the member be a sound representative of the ADF if selected for the activity?	
Has the member consulted a PTI regarding training for the activity?	
Does the member have any DFDA action pending?	
Does the member require any specialised support for physical or mental conditions?	
Has the member attended any ADF sponsored activities previously?	
Are the member's family circumstances conducive to allow participation?	
Would the member be approved 'work release' to participate in training camps and the activity itself?	

Please expand further on the above if required:

Signature: _____ Date: _____

Unit Commander Approval

Employee ID	Rank	Family name	Given name

Is the member cleared to undertake media engagement activities in relation to their participation in the program? -

Comment:

Signature: _____ Date: _____



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Part Three – To be completed by applicant’s Medical Officer

Does the applicant have;

	Y	N	Comments
A service related injury or illness;	<input type="checkbox"/>	<input type="checkbox"/>	
Mental health concerns;	<input type="checkbox"/>	<input type="checkbox"/>	
Trauma	<input type="checkbox"/>	<input type="checkbox"/>	
Anxiety	<input type="checkbox"/>	<input type="checkbox"/>	
Depressive	<input type="checkbox"/>	<input type="checkbox"/>	
Other;	<input type="checkbox"/>	<input type="checkbox"/>	
Pain management issues	<input type="checkbox"/>	<input type="checkbox"/>	

Does the applicant require;

A service animal;	<input type="checkbox"/>	<input type="checkbox"/>	
Full time carer;	<input type="checkbox"/>	<input type="checkbox"/>	
Wheelchair;	<input type="checkbox"/>	<input type="checkbox"/>	
Corrective lenses for athletic events;	<input type="checkbox"/>	<input type="checkbox"/>	
Specialised/protective clothing;	<input type="checkbox"/>	<input type="checkbox"/>	

Mental health conditions

Is there a mental health professional actively supporting the applicant? YES NO

Psychologist Psychiatrist Other

Are there elements of the condition that may need to be considered if the applicant was to be successful to compete in an international multi-sport event in another country:

	Comments
Bright flashing lights	
Loud noises	
Geographical isolation	
Shared sleeping arrangements	
Competitive environment	
Isolation from normal supports	
Crowds	
Team environment	
Anger	

Part Three Cont. – To be completed by applicant’s Medical Officer



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Sport participation – medical clearance

Is the applicant physically and mentally capable of participating in the following:

	Y	N	Comments
Archery (recurve and compound)			
Athletics (track and field. ambulant and chair)			
Cycling (road bike, recumbent bike, hand cycle)			
Shooting (air rifle/pistol)			
Golf			
Indoor rowing (one minute sprint, four minute endurance)			
Power lifting (bench press only)			
Sitting Volleyball			
Swimming			
Wheelchair Basketball			
Wheelchair Rugby			
Winter Disciplines; Alpine Skiing Snowboarding Skeleton, Nordic Skiing Wheelchair Curling			

Medical Officer approval

Employee ID	Rank	Family name	Given name
Unit	Appointment	Email	Contact number
Comment:			
Signature:			Date:

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