



PVS OFFICIAL'S CERTIFICATION APPLICATION

Name _____

Address _____

Club _____ Phone _____

I have fulfilled the PVS established requirements to initially certify for the position of _____

I (a) have attended the appropriate PVS sanctioned or approved clinic as indicated on the other side of this card, (b) have personally completed the prescribed USA-Swimming Officials online tests and (c) am maintaining a current USA-Swimming non-athlete membership.

In initially certifying for a position, I have worked the required number of training sessions specified by PVS (as indicated on the reverse side of this card) to the satisfaction of the supervising referee.

I pledge whenever serving or presenting myself as an official to conduct myself in a professional manner, to keep abreast of the latest rules and procedures of both USA-Swimming and PVS, to enforce the rules fairly and impartially, to remember that the rules are for the protection of the athlete, and to maintain an attitude of sportsmanship. I have also read the PVS Officials Code of Conduct that have been provided to me and agree to be bound by them.

Applicant's Signature _____

E-mail address _____

Name: _____

Certifying for Position of: _____

<u>Name of Meet</u>	<u>Location</u>	<u>Date</u>	<u>Duty</u>	<u>Referee's Signature</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

As a Referee signing this card, I am certifying that the trainee performed the indicated duty to my satisfaction and should be credited toward satisfying the appropriate certification requirement.

Clinic Attended: Location _____ Date _____

Name as it should appear on Nametag _____

Mail this card to: Lynne Gerlach, PVS Certification Officer, 11910 Callow Terrace, Laurel, MD 20708-2802