

Swimming Bay of Plenty Qualification Application For Technical Officials

Applicant's Full Name: _____

Mailing Address: _____

Home Phone No: _____

Email: _____

Date of Birth: _____

Stratum ID: _____ Club: _____

<u>Existing Qualifications</u>	<u>Region</u>	<u>Year</u>	<u>Qualification Requested</u>
Timekeeper	_____	_____	T.K _____
I.O.T.	_____	_____	I.O.T. _____
Starter	_____	_____	Starter _____
			Referee _____
			A.O.D.O. _____

Club Officer's Signature: _____

To be eligible to sit a Regional qualification the applicant must first be a registered member of Swimming New Zealand.

Please send this application form to swimboptechnical@gmail.com An assessor will then arrange a day and time for the assessment.

When the assessment has been completed please hand the form to your club administrator or officials convenor who will arrange to post /email this form (with \$10 fee- paid by cheque or internet banking) to: SBOP Administration Officer PO Box 5084 Rotorua 3044 or swimmingbop@gmail.com

Office use only

Assessment Theory: pass / fail ____/____/____ Practical: pass / fail ____/____/____

Comments: _____

Assessor's Signature _____ Fee Paid _____

Received by Region administrator ____/____/____ Registration verified _____

Badge & card sent ____/____/____ Entered in database ____/____/____