

## EASTERN ZONE - SPEEDO CHAMPIONS SERIES - REGION I MARCH 24 – 27, 2011

## **SPRING 2011 APPLICATION TO OFFICIATE**

Applicant must be a member of USA Swimming and an LSC certified Official (PLEASE TYPE OR PRINT CLEARLY)

| Name:  |  | LSC:   |
|--|--|--|
| Address:   |  | Home Phone:  |
| City, State, Zip:  |  | Work Phone:  |
| E-mail Address:  |  | Cell Phone:  |
| Current LSC Certification:   |  |  |
| Current N2 Certifications and Expirat                                  | ion:                                     |  |
| Current N3 Certifications and Expirat                                  | ion:                                     |  |
| Years/Months at Highest Level:   |  |  |
| PRIOR TO THE START OF EACH SESSIC                                      | DN.                                      | BEFORE EACH SESSION OF THE MEET THEY WORK WHICH BEGIN ONE HOUR  Community College – Buffalo, NY, Meet Referee: Michael Downs |
| I will serve at all sessions: Yes:                                     |  | ,  |
| I cannot serve all sessions. My choice                                 | es for individual sessions are ch        | necked below:  |
| Thursday   | Finals                                   |  |
| Friday   | Prelims                                  | Finals   |
| Saturday   | Prelims                                  | Finals   |
| Sunday   | Prelims                                  | Finals   |
| Shirt Size:  |  | guarantee that the host will provide shirts.   |
| APPLICATION FOR ASSIGNED POSITION applying for more than one position, | ONS: If you would like to be co          | onsidered for an Assigned Position, please check the appropriate box below. If 2,3)  |
| Assignment Request:  | Deck Referee S                           | Starter Chief Judge Admin. Referee   |
|  |  | nere:Stroke & Turn Only  |
|  |  | a certification application to the meet referee.   |
| APPLICATION FOR EVALUATION: If y                                       | ou would like to be evaluated            | during the meet, complete the following:   |
| I request Evaluation as follows:                                       | For Advancement to N2For Recertification | 2For Advancement to N3 (Initial orFinal)<br>For Education  |
|  | RefereeStarter                           | Chief JudgeAdmin RefereeStroke & Turn  |
| Most Recent Evaluation & Evaluator                                     | (MMDDYY)                                 | Name:  |

This application must be received by the Officials Zone Chair no later than March 1, 2011 in order for the applicant to be considered for specific assigned positions (**Deck Referee, Starter, Chief Judge, Admin Ref**). Assigned positions will be notified no later than March 17, 2011. Applications for other deck position will be accepted anytime.

REFEREE FOR MEET: Michael Downs – mhd@cox.net LSC OFFICIALS CHAIR: Sue Seiler — sseiler826@aol.com

You will receive an E-Mail confirmation of your application. If you do not receive a confirmation within 10 days of submitting your application, contact Jamy Pfister at these addresses: **EZ Officials Chair**: Jamy Pfister, 200 Pickwick Dr., Bethel Park, PA 15102- E-mail: <a href="mailto:jamyjaypfi@verizon.net">jamyjaypfi@verizon.net</a>