

EQUESTRIAN COMPETITION JUDGES APPLICATION FORM 2015 Special Olympics World Summer Games

MINIMUM QUALIFICATION: All applicants must be <u>currently active judges in Good Standing</u> with their National and/or International Federation. It is also required that the applicants have experience with a Special Olympics equestrian program. The 2015 Special Olympics World Summer Games will require a working commitment from 24 July – 2 August 2015. Only English riding will be conducted during the Games.

SELECTION: If selected, the Games Organizing Committee will arrange and provide the cost of direct travel to and from Los Angeles, California, local transportation to & from competition venues, accommodations and meals. Officials housing has been designated at St. Mary's College. Selected officials may be housed in the double rooms/suites and paired with a roommate of the same gender. Any travel outside the dates of 23 July – 3 August 2015 will be the sole financial responsibility of the selected official. Anyone unable to meet these requirements, or make this commitment, should not apply.

PROCESSING: Please (1) Print or type in English, (2) Complete in its entirety, information must be verifiable (3) Retain a copy for your records, (4) Optional: Submit other supporting documentation, references, and other Special Olympics experiences to be considered under separate cover and (5) Do NOT fax this application.

SECTION	11-PERSONAL DATA				
Name					
	Family		First		Gender (M/F)
Mailing					
Address					
	Street		City		
	State/Province/Country		Postal Co	de	
Phone					
	(Country code)				
Fax			Email Add	dress:	
	(Country code)				
CE CTION		CONTACTION			
	12 - CERTIFICATION INF	ORMATION			
Current	certification level:				
Certifying Organization		Country	Certificate N	umber	Expiration Date
Na	tional Federation				
	FEI	N/A			
CECTION	I 2 OFFICIATING EVER	DIENICE			
	3 - OFFICIATING EXPE		1. 1. 1.	CC	
List the r	names of two (2) individu	als who can be	e consulted regarding	your offic	lating ability.
Name:			Name:		
Affiliatio			Affiliation:		
Address:			Address:		
Phone:	()		Phone:	()	
Email ad	dress.		Fmail address:		

assignment for wh	of your preference 1 throug hich you possess outstanding c Equitation Dress ana - team relay Prix Co Trail C	ompetence and ex age aprilli	highest priority), the officiating perience.		
	pecial Olympics equestrian jud		<u> </u>		
Year	Name of Compe	etition	Assignment		
	1 Carre Sodered code	:			
List most recent major competitions judged outside of Special Olympics.					
Year	Name of Competition		Assignment		
application is true the Selection Co	e to the best of my knowledge	. As part of my ap ols, including obse	ne information presented in this oplication, I grant permission for revers, regarding my officiating tal health.		
Signature of Appli	cant	Date			
Signature of Desig	nee of Special Olympics Program,	/Sport Federation	Date		
Name of Special O	lympics Program (please print)				
Please check if ap	oplicable:	Plea	se return by 1 July 2014 to:		
Athlete Official	•	Spo	Sports Training & Competition		
Athlete Official M	entor e note your Athlete Official?		Mail: 1133 19 th Street NW Washington DC 20036 Email: <u>sprescott@specialolympics.or</u> q		
			plication will be confirmed by email.		