

HANDBALL COMPETITION OFFICIALS APPLICATION FORM 2015 Special Olympics World Summer Games

MINIMUM QUALIFICATION: All applicants must be <u>currently active officials in Good Standing</u> with their National and/or International Handball Federation. Officials experience with a Special Olympics handball program is preferred. The 2015 Special Olympics World Summer Games will require a commitment from 24 July – 2 August 2015.

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	1 - PERSONAL DATA		
Name			
-	Family	First	Gender (M/F)
Mailing Address			
	Street		City
-	State/Province/Country		Postal Code
Phone			
-	(Country code)		-
Fax			Email Address:
_	(Country code)		
SECTION	2 - CERTIFICATION INFORMATION		
Certifying Organization		Country	Name of Position/Level of Certification
	National Federation		
Internati	onal Handball Federation (IHF)		
SECTION	3 - OFFICIATING EXPERIENCE		
List the na	ames of two (2) individuals who can b	be consult	ed regarding your officiating ability.
Name:		Nar	
Affiliation Address:	:		liation: Iress:
	- <u>-</u> ()		
Phone: Email add		Pho Em	ail address:

List most recent Special Olympics team handball officiating experiences

Үеаг	Name of Competition	Assignment

List most recent major competitions officiated outside of Special Olympics.

Үеаг	Name of Competition	Assignment

I certify that I am a currently active team handball official and that the information presented in this application is true to the best of my knowledge. As part of my application, I grant permission for the Selection Committee to contact individuals, including observers, regarding my officiating experience and ability. I certify that I am in good physical and mental health.

Signature of Applicant	Date
Signature of Designee of Special Olympics Program/Sport Federation	Date

Name of Special Olympics Program (please print)

Please check if applicable:

Athlete Official _____ Athlete Official Mentor _____ If a Mentor, please note your Athlete Official? Please return by <u>1 July 2014</u> to:

Sports Training & Competition

Mail: 1133 19th Street NW Washington DC 20036 Email: <u>sprescott@specialolympics.org</u>

Receipt of application will be confirmed by email.