# ACCREDITATION APPLICATION 2012

**PROGRAM NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

1. Special Olympics Mission Statement is in Program’s Bylaws/Governing Documents and the Program uses the terminology “intellectual disability” or its plural “intellectual disabilities” in its documents and correspondence.

* Yes
* No

1.1 Copy of Program’s most recent Bylaws/Governing Documents are attached

* Yes
* No

2. Number of members on the Board of Directors/Program Committee: \_\_\_\_\_\_\_\_

 2.1 List names of the following Board/Program Committee members:

 Close Family Relation of Athlete \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Sports Expert \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Expert in Intellectual Disabilities \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Name of Special Olympics athlete member on the Board of Directors/Program Committee:

 Athlete \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. List two (2) Official Special Olympics Sports offered by the Program:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. The Program submitted data for registered athletes in the 2011 Athlete Participation Count

* Yes
* No

 5.1 The Program registers athletes in accordance with General Rules Section 2.06.

* Yes
* No

5.2 Most recent Sample Athlete Registration form submitted to SOI in \_\_\_\_\_\_\_\_\_\_ and there is no change.

* Yes
* No

6. Did the Program hold a qualifying event for Regional or World Games during the past two years?

* Yes
* No

7. Dates of last two (2) Board Meetings: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 7.1 Copy of the minutes of those two (2) meetings attached

* Yes
* No

 7.2 The Program’s Bylaws/Governing Documents limit the terms of members of the Board of

 Directors/Program Committee to a maximum of nine (9) consecutive years.

* Yes
* No

8. Program uses Special Olympics logo correctly.

 8.1 Sample Program letterhead and business card attached with this application.

* Yes
* No

9. List the Names of the Board/Program Committee Chair, the Executive/Program Director and the Sports Director (must be three different persons) :

Board/Program Committee Chair \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Program/Executive Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Sports Director \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

10. The Program has an Annual operational plan, a 2013 budget and annual financial statements for the year ended 31 December 2011.

 10.1 Annual Operational Plan Attached

* Yes
* No

10.2 2013 Budget Attached

* Yes
* No

 10.3 2011 Annual Financial Statements Attached

* Yes
* No

10.4 2011 Adjusted Gross Revenue Form Attached

* Yes
* No

11. The Program has paid its Accreditation Fees due through 2012.

* Yes
* No

11.1 If not, the Program and SOI have a written plan for payment of past due Accreditation Fees and the Program is complying with that plan.

* Yes
* No

 11.2 Properly Signed Accreditation License Attached

* Yes
* No

**The information in this application is complete and correct**:

By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Name of Program /Executive Director*

**Approved by the Board of Directors**:

By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 *Name of Chair, Board of Directors/Program Committee*

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