



First Name - _____ Last Name- _____

Northern/Southern/ASSA _____ Club _____

Level	Position	Date of Clinic Date	Satisfactory Deck Evaluation Date & Initials of Referee	
			Date	Initials
I	Timer Place Judge, Safety Marshall	Mentor	1. YYYY/MM/DD	
		Deck	2.	
		Deck	3.	
II/III	Clerk of Course	Mentor	1. YYYY/MM/DD	
		Deck	2.	
		Deck	2.	
	Chief Timer	Mentor	1. YYYY/MM/DD	
		Deck	2.	
		Deck	3.	
	Chief Finish Judge	Mentor	1. YYYY/MM/DD	
		Deck	2.	
		Deck	3.	
	Chief Judge Electronics	Mentor	1. YYYY/MM/DD	
		Deck	2.	
		Deck	3.	
	Recorder Scorer	Mentor	1. YYYY/MM/DD	
		Deck	2.	
		Deck	3.	
	Stroke/Turn & Head Lane Timer	Mentor	1. YYYY/MM/DD	
		Deck	2.	
		Deck	3.	
	Starter	Mentor	1. YYYY/MM/DD	
		Deck	2.	
		Deck	3.	
	Meet Manager	Mentor	1. YYYY/MM/DD	
			2.	
			3.	
Level I Clinic Conducted Date, YYYY/MM/DD Club				
IV	Referee Clinic		1. YYYY/MM/DD	
			2.	
		Date Approved Level IV	YYYY/MM/DD	
V	Complete one year of Officiating as a Level IV			
	Level II Clinics Conducted		1. YYYY/MM/DD	
	National Sanctioned Meets		1.	
			2.	

HOW TO USE THIS FORM

After you have taken the online and/or Instructor given clinic **AND** been mentored at a swim meet:

- Please enter dates Year/Month/Day of activity.
- Have the clinic instructor or meet referee initial the form.
- Provide a copy of the form to your club officials' administrator so they can update your officiating record.

Certification information can be found here:

<http://www.swimalberta.ca/officials/clinics-and-certification>

It is the Official's responsibility to do the above