

Carolina Region/USAV National Official Candidate Application

NAME:		USAV #:
ADDRESS:		PHONE (H):
CITY,ST,ZIP:		EMAIL:
CERTIFICATION DESIRED:		
☐ Junior National Referee ☐ ☐	National Referee	☐ National Scorer
CURRENT CERTIFICATION:		NUMBER YEARS AT CURRENT CERTIFICATION:
☐ Jr National Ref ☐ Regional Ref ☐ 1	Regional Scorer	Referee Scorer
Historical Review of Officiating Experience: (# of years, level of officiating, type of matches do	ne, etc. Attach add	itional page(s) as needed)
USAV:		
PAVO/COLLEGE:		
OTHER (National Federation, Recreation Leag	ues, etc.):	
Any other information pertaining to Officiating	:	
References/Mentors (minimum of two): My sign and my agreement to serve as a mentor to the ap		ites my recommendation of this applicant for a National Rating
and my agreement to serve as a mentor to the ap	ppicant during th	e training process.
Printed Name:	Signature:	Email:
Printed Name:	Signature:	Email:
As a National Official Candidate, I agree to abide b	by the Carolina Reg	ion Officials Good Standing Policy once certified.
APPLICANT		
SIGNATURE:		DATE: