



APPLICATION TO OFFICIATE

Meet Name

Meet Start Date

Meet Location

Meet End Date

PREFERRED POSITION (S) *(List preferred positions in numerical order, with 1 your first choice)*

☐

S/T

☐

Asst Chief Judge

☐

Chief Judge

☐

Deck Referee

☐

Deck Starter

☐

Admin Referee

☐

Evaluator

☐

Meet Referee

Number of days in
this meet

I am available to work

Day 1		Day 2		Day 3		Day 4		Day 5	
Trials	Finals	Trials	Finals	Trials	Finals	Trials	Finals	Trials	Finals

CONTACT INFORMATION

Name

Email

Home Phone

Cell Phone

CURRENT CERTIFICATIONS

Your LSC

PC Zone

Position	LSC Certification Level	National Cert Level
Stroke/Turn		
Chief Judge		
Starter		
Referee		
Admin Referee		

Comments:

To send this application:

This is a writable PDF. Save this blank form FIRST. Then fill out all fields, and save the file as a new PDF file. Email the PDF file to Phil Grant at pgrant@pacswim.org

Form revision of 9-7-2021