

UK ATHLETICS – OFFICIALS' EDUCATION PROGRAMME

APPLICATION FOR ACCREDITATION AS LEVEL 2 (CLUB) OFFICIAL

	,					
Name:				Phone:		
Address:						
Postcode:				Email:		
Date & Venue of	f Level 2	course and name(s) of tutor(s):			
Discipline:	Track/Field/Timekeeper/Starter/Marksman (please circle)					
County/District				Region/ Country		
CRB check done	e?	YES	NO	Date of CRE	3	
Officials Licence	e number	(if already held):				
b) Complete a libeen done in co Coordinator for you c) Apply for an ed d) Complete the should show evic officiating in both more than four n	cence application of the central centr	oplication form if your course a. d CRB disclosure ence form overlear fundertaking a vantal and vertical justice.	you have not a e attendance through UKA f for at least 4 ariety of roles umps and both	already done and will be r ! meetings in and in the conshot and lo	rour chosen discipline. e so. Ideally this should have retained by the Education n your chosen discipline. You hase of field officials, of long throws. This may require that not need to complete the	
F YOU WISH T	O PROG	RESS FURTHE	R THEN COM	IPLETING T	HE LOGBOOK IS ESSENTIAL	
When you have completed the required experiences this form should be submitted to the Education Coordinator for your area (contact details on page 5). If your form shows sufficient relevant experience it will be sent to UKA with your licence application form so that your Level 2 Club licence can be issued.						
Name of Assess	sor:					
Signature of As	sessor.			DATE	. / /20	

EXPERIENCE FOR LEVEL 2 (CLUB) OFFICIAL

NAME OF OFFICIAL

Name of Meeting attended	Date and venue	Duties carried out	Name (and signature) of Referee/Chief
If you are unable to	get the signat	ure of the Ref/Chief then write the n	ame clearly in the appropriate box.
		7	
		*	
12			

Date