2017 USA GYMNASTICS NATIONAL JUDGES' COURSE ELIGIBILITY FORM

Name: _____ Region _____ State _____
First Last

E-mail address: _____

Check one of the following:
_____Previously held a Brevet or National rating
_____Held a Level 10 Rating for 8 years (Must have achieved a Level 10 rating by Dec. 31, 2009)
_____Previous Senior National Elite team member and minimum of 21 years of age

Professional Member ID #	Membership Expiration Date	Safety Cert. Expiration Date	Background Check Expiration Date

Please use this form to submit to your Regional Technical Committee Chairman **NO LATER THAN DEC. 31, 2016**. If you cannot obtain a signature for a function attended prior to receipt of this form, please attach a copy of your original CPE receipt. In the event that proof of attendance is requested, please keep original documentation. Your annual CPE hours can also be used toward fulfillment of the National Course requirements.

ATTENDANCE AT TWO OF THE FOLLOWING EDUCATIONAL EVENTS within the current cycle of January 2013-December 31, 2016. Signature of a USA Gymnastics National, Regional or State officer or NAWGJ National officer or RJD/SJD is required. **TOTAL ATTENDED:** ☐

Name of Event	Include	2013	2014	2015	2016
Compulsory Workshop (Reg'l or Nat'l) - Signature not required		Region ___ Orlando ___ Reno ___	NA	NA	NA
USA Gymnastics Regional Congress	**Region:** **Signature:**				
NAWGJ Regional Symposium	**Region:** **Date:** **Signature:**				
USA Gymnastics National Congress	**Signature:**				
NAWGJ National Symposium	**Signature:**	NA		NA	NA

VOLUNTEERING AT A MINIMUM OF 2 SEPARATE FUNCTIONS FOR A TOTAL OF 12 HOURS (a minimum of 2 hours per event) from 2013 through 2016:
TOTAL NUMBER OF HOURS OF VOLUNTEER WORK: ☐

Name of Event	Include	2013	2014	2015	2016
At a State, Regional or National Clinic -	**Date:** **# of Hours:** **Signature:**				
At a State, Regional or National Training Camp	**# of Hours:** **Signature:**				
At a Competition: USA Gymnastics (or NCAA) State, (Conference), Reg'l or National	**Date:** **# of Hours:** **Signature of Meet Dir. or Meet Ref:**				
Serving as USA Gymnastics or NAWGJ *Elected Officer	**Position held:**				

* USA Gymnastics SACC, Reg'l or Nat'l Comm. Chair or NAWGJ SJD, RJD or National officer