

# National Exam Application Technical Officials



**Name:** \_\_\_\_\_  
**Mailing Address:** \_\_\_\_\_  
 \_\_\_\_\_  
**Home Ph No:** \_\_\_\_\_ **Mobile No:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_ **Fax:** \_\_\_\_\_  
**Registration No:** \_\_\_\_\_ **DOB:** \_\_\_\_\_  
**Region:** \_\_\_\_\_ **Club:** \_\_\_\_\_

Existing Qualification	Centre Month/Year	National Month/Year	Examination Requested
I.O.T			IOT
Starter			Starter
Referee			Referee

**Proposed Venue/Date** \_\_\_\_\_

Dates of Regional Meets where candidate has officiated

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Recommendation \_\_\_\_\_ Regional Examiner \_\_\_\_\_

**To be eligible to sit a National Exam the following condition must be met and certified by a Regional Examiner.**

Starter Regionally qualified and completed minimum of 5 centre/region or sanctioned meets as a starter. Prior to application being accepted recommendation from a member of the SNZ Technical Advisory Committee is to be obtained.

Referees Regionally qualified and completed a minimum 5 centre/region or sanctioned meets as a referee. Prior to application being accepted recommendation from a member of the SNZ Technical Advisory Committee is to be obtained.

To sit the National Referees examination the candidate must have passed the National IOT and starters examinations and held the most recent one for minimum of six months.

**Please send this Application Form to the Technical Advisory Committee member that covers your region who will contact you to organise your examination day and time.**

Upper North Island	Central North Island	Lower North Island	Upper South Island	Lower South Island
	Brent Singer 21 Balgowan Tce Conifer Grove Auckland Ph: 09 269 0091 Fax: 09 269 0096 <a href="mailto:bsinger@rycodies.co.nz">bsinger@rycodies.co.nz</a>	Bill Matson 3 Maple Lane Waikanae Ph: 04 293 3817 Fax: 04 293 3787 <a href="mailto:matsons@xtra.co.nz">matsons@xtra.co.nz</a>	Lesley Huckins 12 Villa Grove\Upper Riccarton Christchurch Ph: 03 343 1320 <a href="mailto:huckinz@xtra.co.nz">huckinz@xtra.co.nz</a>	Lyn Sutherland 7 Moana Street Invercargill Ph: 03 217 4961 <a href="mailto:lyn.suth@xtra.co.nz">lyn.suth@xtra.co.nz</a>

**Office use only**

Enrolment form received \_\_\_\_\_ Pass slip received in office \_\_\_\_\_  
 Date Examiner Advised \_\_\_\_\_ Badge and letter sent \_\_\_\_\_