



<b>OFFICIAL'S NAME/LSC</b>	
<b>MEET(s)/SESSION(s)/DATE(s)</b>	
<b>ADMINISTRATIVE OFFICIAL CERTIFICATION</b>	
<b>DEFINITIONS</b>	
<b>Certification:</b> Administrative Official able to officiate at all LSC meets	
<b>Satisfactory Performance:</b> Able to demonstrate Performance Requirements. Deficiencies must be provided by LSC OC or designee in writing to the affected official with an Action Plan to success.	
<b>Sessions:</b> At USA Swimming sanctioned or approved meets, recorded in OTS	
<b>Trainer:</b> Designated by the Referee at a meet as the Administrative Referee Mentor	
<b>Training Sessions:</b> Meet sessions that include strokes and/or relays. Time Trials and Freestyle Only sessions do not count toward training session requirements. Sessions shall be recorded in OTS.	
<b>USA Swimming Member:</b> Completed all USAS member associated requirements before on deck apprenticeship	
<b>Apprenticeship Requirements</b>	
<input type="checkbox"/>	USA Swimming Member
<input type="checkbox"/>	Attend an Administrative Official Training clinic
<input type="checkbox"/>	Apprentice as an Administrative Official for at least 4 training sessions, at a minimum of 2 meets, with at least 2 trainers
<input type="checkbox"/>	Pass the USA Swimming Administrative Official Certification test with an 80% or higher
<b>Certification Performance Requirements for Certification</b>	
May be evaluated during last apprentice session and use MR sign-off for each session. Y-Yes, N-No, ND - Not Demonstrated	
<input type="checkbox"/>	Arrives on time, prepared with necessary personal equipment, in proper and professional uniform
<input type="checkbox"/>	Arrives at the meet with necessary equipment and supplies, or has arranged for them
<input type="checkbox"/>	Understands the pre-meet entry and registration process
<input type="checkbox"/>	Understands the rules and procedures for the meet set out in the Meet Announcement
<input type="checkbox"/>	Develops an understanding of the rules as outlined in the USA Swimming Rulebook for determination of official time
<input type="checkbox"/>	Introduced to meet set-up in meet management software to include software connection selection between computer and timing console
<input type="checkbox"/>	Uses appropriate procedures for timely preparation of accurate heat sheets
<input type="checkbox"/>	Uses appropriate procedures for timely preparation of lane timer sheets
<input type="checkbox"/>	Accurately performs timing resolutions for each heat
<input type="checkbox"/>	Observes computer operator move swimmers around in an event
<input type="checkbox"/>	Records and reconciles DQ and NS.
<input type="checkbox"/>	Reviews, checks and finalizes all results & any timing adjustments/corrections for each event
<input type="checkbox"/>	Observes a heat malfunction resolution
<input type="checkbox"/>	Understands the timing system used and its limitations. Can operate basic functions of systems if necessary.
<input type="checkbox"/>	Understands scoring program used and its limitations. Can operate basic functions of systems if necessary.
<input type="checkbox"/>	Understands the role and duties of the Clerk of Course
<input type="checkbox"/>	Understands the role of the Referee and includes the Referee in decision making as appropriate
<input type="checkbox"/>	Works well with other officials, timing system and meet management program operators
<input type="checkbox"/>	Works well with coaches and athletes
<input type="checkbox"/>	Understands the importance of participating in many levels and types of meet as an Administrative Official
<input type="checkbox"/>	Understands performance criteria as outlined in Administrative Official Professional Document
<input type="checkbox"/>	Understands USA Swimming Safe Sport and MAAPP rules
<b>Comments (if needed)</b>	
<b>Signature of MR (session 1)</b>	
<b>Signature of MR (session 2)</b>	
<b>Signature of MR (session 3)</b>	
<b>Signature of MR (session 4)</b>	
<input type="checkbox"/>	<b>Recommend Certification as REFEREE</b>
<b>CERTIFIER'S NAME/LSC</b>	
<i>Certification must be completed within one year of the AO clinic.</i>	
<i>Understands need to return completed checklist to <b>AND</b> receive Certification Notification from: FGC Officials Chair - officials@fgcswim.org</i>	

