

AYSO Application for Referee Instructor or Evaluator Certification

PLEASE RETAIN THIS FORM AS YOUR RECORD OF COMPLETED TRAINING NEEDED FOR UPGRADE

When completed, submit to your Area Referee Administrator or Area Director of Assessment

Name: _____ Phone: _____ Section _____ Area _____ Region _____

Address: _____ City: _____ State _____ Zip _____

AYSO ID: _____

Regional Referee Instructor

Introduction to Instruction Course	Date:	Lead Inst.	Roster #:
Referee Instructor Course	Date:	Lead Inst.	Roster #:
Evaluation (30 minutes in Regional Course)	Date:	Evaluator	Roster #:
Referee Instructor Exam.	Date:	Test Admin.	Roster #:

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Verifying Signature of Area or Section Referee Administrator or Director of Referee Instruction _____ Date

Intermediate Referee Instructor

4 hours of in-class instruction experience	Date:	Lead Inst.	Roster #:
Evaluation (30 min in Intermediate Course)	Date:	Evaluator	Roster #:

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Verifying Signature of Area or Section Referee Administrator or Director of Referee Instruction _____ Date

Advanced Referee Instructor

Advanced Referee Instructor Course	Date:	Lead Inst.	Roster #:
Evaluation (60 min in Advanced Course)	Date:	Evaluator	Roster #:
Advanced Referee Instructor Exam	Date:	Test Admin.	Roster #:

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Verifying Signature of Section Referee Administrator or Director of Referee Instruction _____ Date

National Referee Instructor

Recommendation: Section Director of Referee Instruction	Date:
Recommendation: Current National Referee Instructor	Date:
Referee Instructor Evaluator Certification Date (applicant must be an AYSO Instructor Evaluator)	Date:
Assessor Certification (Assessor or National Assessor)	

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Verifying Signature of Section Referee Administrator or Director of Referee Instruction _____ Date

My current AYSO Referee Instructor Certification level is (None, Instructor or Advanced Instructor): _____

I have completed the requirements and I am applying for certification as a(n) _____ Referee Instructor.

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Applicant's Signature for Instructor Certification **Current Referee Certification Level** **Date**

Referee Instructor Evaluator

Referee Instructor Evaluator Course		Lead Inst.	Roster #:
1st practice evaluation		Lead Inst.	Roster #:
2nd practice evaluation		Lead Inst.	Roster #:

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Verifying Signature of Section Referee Administrator or Section Director of Referee Instruction _____ Date

My current Instructor Certification is: _____ (must be an AYSO Referee Instructor or higher).

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Applicant's Signature for Instructor Evaluator **Current Referee Certification Level** **Date**