



OHIO HIGH SCHOOL ATHLETIC ASSOCIATION  
4080 Roselea Place, Columbus, Ohio 43214  
Phone: (614)267-2502; Fax: (614)267-1677  
Web Site: [www.ohsaa.org](http://www.ohsaa.org)

**APPLICATION FOR OBTAINING AN OHSAA OFFICIALS PERMIT**

**HOW TO APPLY**

- 1) Read and complete **BOTH** sides of this form and sign. Complete all sections.
- 2) Mail this form completed and \$60.00 check or money order payable to the OHSAA (see address above).
- 3) Application must be received between Fall: June 15-July 15, Winter: Sept 15-Oct. 15 and Spring: Dec 15-Jan.15.
- 4) Send well in advance of the test period so rulebooks and materials can be mailed to you. Study materials are available as follows: Fall- late June; Winter-late September; Spring-January 1.

**TESTING PROCEDURES**

- 1) Testing Online-Instructions to be included with materials packet.
- 2) Test dates are: Fall sports July 15 to Aug 15, Winter Oct 15 to Nov 15 and Spring Jan 15 to Feb 15.
- 3) All tests must be submitted prior to 11:59 pm on the final day of the testing period.
- 4) You are allowed to take the test twice.

**MEETING REQUIREMENTS**

- 1) All officials have local meeting requirements except Field Hockey and Gymnastics.
- 2) **I agree I will attend the required number of Local Assoc. meetings. Please initial here \_\_\_\_\_.**  
Information on requirement is available in the Officials Handbook. Meetings can be located at the following link, <http://myohsaa.ohsaa.org/public/homepage.aspx>.

**PREVIOUS OFFICIATING EXPERIENCE**

- 1) **An official that transfers to Ohio from another state should submit documentation of “license” in that state.**
- 2) **An individual trained/licensed as an official with another sports body (i.e. USSF, USAVB, etc.) must submit documentation of previous licensing.**

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NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY, STATE & ZIP: \_\_\_\_\_

SOCIAL SECURITY NUMBER (last 4 digits only): \_\_\_\_\_

HOME PHONE NUMBER: \_\_\_\_\_ BUSINESS NUMBER: \_\_\_\_\_

CELL PHONE NUMBER: \_\_\_\_\_ COUNTY \_\_\_\_\_

SPORT: \_\_\_\_\_ EMAIL: \_\_\_\_\_

- 1) I am now 18 years of age or older. **Date of Birth:** \_\_\_\_\_

- 2) I have graduated or am no longer enrolled in high school. Yes \_\_\_\_\_ No \_\_\_\_\_
- 3) My OHSAA Permit Number is/was \_\_\_\_\_.
- 4) I have previously been registered to officiate by another state or sports body

Name of state or sports body \_\_\_\_\_  
 Years of Officiating \_\_\_\_\_ Level qualified for \_\_\_\_\_

**Send proof of previous experience (permit card, registration form, etc).** Failure to submit the supporting Document(s) will result in a delay in your processing. Questions regarding the application may be submitted to Ben Ferree at [bferree@ohsaa.org](mailto:bferree@ohsaa.org).

- 5) I have been convicted of a felony. Yes \_\_\_\_\_ No \_\_\_\_\_

Explain:

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**CONCUSSION TRAINING CERTIFICATION**

In addition, the OHSAA is confirming with all officials that the new concussion requirement has been met. The OHSAA Concussion regulations have changed in response to a change in state law when Governor Kasich signed House Bill 143. Complete details of this bill as it relates to the OHSAA can be found at [www.ohsaa.org/medicine/Concussions/ConcussionRegulations.pdf](http://www.ohsaa.org/medicine/Concussions/ConcussionRegulations.pdf). **You must acquire concussion certification prior to applying for an OHSAA permit. For information for completing the requirement go to the following link and follow the instructions: <http://www.ohsaa.org/officials/default.htm>.**

By submitting this application, you swear that you have completed all necessary safety training and have provided only truthful information on this reply. By submitting this information, you confirm all information to be true.

**I have completed one of the following...**

<u>Course</u>	<u>Date Complete mm/dd/yyyy</u>	<u>Certification ID</u>
NFHS Concussion Training		
Pupil Activity Coaching Permit(PAP)		
CDC Concussion Training		

When the completed application and your \$60.00 check are received, an information packet will be mailed. Any information not completed will delay processing. Complete each section before submitting to our office. Questions regarding the application may be submitted to Ben Ferree at [bferree@ohsaa.org](mailto:bferree@ohsaa.org).

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 (Signature)

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 (Date)