



CFSC Competition Test Credit Application

Candidate Name:	
Candidate USFSA #: Parent/Guardian Name: (if candidate is under 18)	
Email Address:	
Phone Number:	
Coach's Name:	
Coach's Email Address:	
Coach's Phone Number:	
Name of Competition:	
Date of Competition:	
Test requesting credit:	Select Test

I verify that the athlete listed above is eligible to receive Test Credit through IJS protocol. I have seen the unaltered and correct scores, which match the protocol the athlete is submitting. I understand that altering a protocol sheet to meet the test requirement is considered an ethics violation of U.S. Figure Skating and The Professional Skaters Association.

Coach's signature _____ Date: _____

Candidate's signature _____ Date: _____
(Parent/Guardian if candidate under 18)

INSTRUCTIONS

STEP 1: Complete the form and print.

STEP 2: Attached documents collected at the competition from the "Test Credit Packet" including:

1. The overall event results, which include the names and signatures of the Event Referee and Technical Controller.
2. Your individual protocol
3. Your **Test Credit Skater Report** from the competition accountant.

STEP 3: Have your coach verify that the above documents are true and valid and then sign.

STEP 4: Make \$25.00 check payable to Carolinas FSC. Submit documents with check to the club's Test Chair:

Carolin's FSC Test Chair
c/o Extreme Ice Center
4705 Indian Trail Fairview Rd
Indian Trail, NC 28079