## **CFSC** Testing-

## For Coaches - IJS Protocol for Test Credit Request Form

| Skater's Name              |  |
|----------------------------|--|
| Skater's USFS #            |  |
| Skater's Home Club         |  |
| Test Requesting Credit for |  |
| Name of competition        |  |
| Date of competition        |  |

| Coach's Name  |  |  |  |
|---|--|--|--|
| Coach's USFS #  |  |  |  |
| Coach's PSA #   |  |  |  |
| 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              |  |

## For Skaters -

Select the test you are requesting credit for and make payment by <u>check</u> payable to: Columbia Figure Skating Club

| SINGLES FREE SKATE TESTS | S PAIRS TESTS       | DANCE TESTS         |  |
|--------------------------|---------------------|---------------------|--|
| Juvenile (\$10)          | Juvenile (\$10)     | Juvenile (\$10)     |  |
| Intermediate (\$10)      | Intermediate (\$10) | Intermediate (\$10) |  |
| Novice (\$10)            | Novice (\$10)       | Novice (\$10)       |  |
| Junior (\$10)            | Junior (\$10)       | Junior (\$10)       |  |
| Senior (\$10)            | Senior (\$10)       | Senior (\$10)       |  |

## Please attach the following documents to this form with your payment:

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.