

## **Application for Sports Certification**

One form per certification

Instructions: Please print clearly or type information below and return to the Headquarters office.

List permanent maning address and telephone number (not conege address).			
Name:	Email:		
Address:	Daytime Phone:		
City:	Evening Phone:		
State: Zip:	Male 🗌 Female 🗌		
Class A Volunteer ID #(optional):	Occupation:		

If you are an SOWI athlete becoming a coach, check this box.

If your address changed since your Class A registration I am a Class A registered volunteer with SOWI and have com-			
Date General Orientation was completed:			
The Certified Training School I attended was for:			
	(please list sport)		
The Training School was held in	on/		
(city)	(month / date / year)		
Coaching/Officiating experience at the high school/col	lege levels (circle Coach or Official): Yes 🗌 No 🗌		
Playing experience at high school or college levels: Yes	No		
Sport(s) you played:			

**PRACTICUM** – a minimum of **10 hours** working with Special Olympic athletes following a certified training school is required in the sport you are becoming certified in. *Hours must be completed after attending a training school and within one year of the date you attended.* Up to three hours may be used from each practice and each tournament. All applications must have practicum dates and hours listed.

Date	# of Hours	# of Athletes	Date	# of Hours	# of Athletes	Date	# of Hours	# of Athletes

## Other Information:

How many SO sports do you coach? \_\_\_\_\_ How many sports are you certified in? \_\_\_\_\_

Highest level of education achieved:

Do you have any relatives with a cognitive disability? Yes No If yes, relationship:

□ I have read the SOWI/SOI/NGB sports rules for the sport listed above, I am familiar with the SOWI Competition Guide and current rule changes, and will comply with the *Certified Coach Code of Conduct*. Having satisfactorily completed all requirements, I hereby request Special Olympics certification in the area identified above.

		Office use only		
		Initials Date	Э	
Signature of Applicant	Date	BB Check		
		Email AM		
		BB Entry		
Signature of Agency Manager	Date			

## Process to Become a Special Olympics Certified Coach

- 1. Person completing an Application for Sports Certification must have attended an entire SOWI Certified Training School (CTS).
- 2. After attending a CTS, coaches must complete 10 hours of practicum working with Special Olympics athletes in the specific sport the coach was trained to be certified in all hours must completed after attending the CTS. Application forms must be received by the program office within one year of the date of attendance forms received after a year will be void.
- 3. All lines on the Application for Sports Certification must be filled in:
  - *a.* Agency number in the top right hand corner
  - b. Personal contact information in the boxes please use the full name used on your Class A Volunteer form (i.e. Michelle instead of Shelly)
  - c. Class A Volunteer status must be checked YES or NO

The General Orientation MUST be completed *prior* to becoming a Certified Coach

- d. Sport, city and date of CTS must be completed
- **e.** Check the certification category applying for. If checking *Sport*, please write the specific sport you are applying for (one sport per application)
- f. Coaching/Officiating experience must be completed
- *g.* Education and family background information must be completed
- *h.* PRACTICUM HOURS: Please accurately fill in table with **training dates**, **number of hours**, and **number of athletes**. Up to **THREE HOURS per date** may be used for each practice or tournament. *Only use hours for the sport you are applying to be certified in.*
- 4. The application must be signed by the applying coach and Agency Manager.
- **5.** It is encouraged that applicants and/or Agency Manager make a copy of the form before it is mailed to the Headquarters office.
- 6. Once the completed form is received and approved, it is entered into the SOWI volunteer database. Coaches will receive a confirmation letter informing them of their new certification and date of expiration. All certifications expire on December 31<sup>st</sup> of the third calendar year from the date of the CTS. Approximately six months before a certification expires, a letter is mailed to the coach informing them of the upcoming expiration.
- **7.** If you have any questions, please contact the Director of Training & Competition at 1-800-552-1324, ext. 5679.
- Please mail, email, or fax the application to the address below: Special Olympics Wisconsin Attn: Director of Training & Competition 2310 Crossroads Drive, Suite 1000 Madison, WI 53718

Email: afrizzo@specialolympicswisconsin.org

Fax: 608-222-3578