 CCCAN CHAMPIONSHIPS 2019

BARBADOS

APPLICATION FORM FOR TECHNICAL OFFICIALS

FORMULARIO DE SOLICITUD PARA OFICIAL TECNICO

Email to [cccansecretary@gmail.com](mailto:cccansecretary@gmail.com) no later than March 31, 2019

NAME/NOMBRE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SIGNATURE/FIRMA \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EMAIL ADDRESS/DIRECCION ELECTRONICA\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

COUNTRY/PAIS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

I apply to Officiate in/Solicito para oficiar en:

* **Swimming/Natacion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

FINA: LIST #\_\_\_\_\_\_\_\_\_\_\_\_\_

THE POSITION I CAN FILL IS/LA POSICION QUE PUEDO TRABAJAR ES:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **Open Water Swimming/Aquas Abiertas \_\_\_\_\_\_\_\_\_\_\_\_\_\_**

THE POSITION I CAN FILL IS/LA POSICION QUE PUEDO TRABAJAR ES:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **Artistic Swimming/Natacion Artistica \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

THE POSITION I CAN FILL IS/LA POSICION QUE PUEDO TRABAJAR ES:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

FINA: List # \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Participant and Passed  FINA JUDGES SCHOOL/PARTICIPACION y APROBACION EN ESCUELA DE

JUECES FINA :

PLACE/LUGAR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_YEAR/ANO\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

      CONFLICT OF INTEREST/CONFLICTO DE INTERESES: Yes or No/Si o No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CONFLICT IS/DETALLE EL CONFLICTO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

EVENT WITH CONFLICT/EVENTO CON CONFLICTO:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* **Water Polo/Polo Acuatico\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

THE POSITION I CAN FILL IS/LA POSICION QUE PUEDO TRABAJAR ES:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**EXPERIENCE AS A TECHNICAL OFFICIAL DURING THE PAST 4 YEARS**

**EXPERENCIA COMO OFICIAL TECNICO DURANTE LOS ÚLTIMOS 4 AÑOS**

(List meets/events at which officiated/Lista de competencias/eventos en los que fue oficial)

**NATIONAL/NACIONAL:**

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_6.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_8.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_10.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

INTERNATIONAL/INTERNACIONAL:

1.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_4.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_6.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_8.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

9.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_10.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

MY PRESENT POSITION AS TECHNICAL OFFICIAL IS/MI POSICIÓN ACTUAL COMO OFICIAL TÉCNICO ES:

NATIONAL/NACIONAL:

This Form must be signed by the President or Secretary of the National Federation / Este Formulario debe ser firmado por el Presidente o el Secretario de la Federación Nacional.

Name/Nombre \_Title/Titulo

Date/Fecha Federation Stamp/ Sello Federativo:

NOTE: TEAM OFFICIALS MAY NOT ACT AS TECHNICAL OFFICIALS/ LOS FUNCIONARIOS DE EQUIPOS NO PUEDEN ACTUAR COMO OFICIALES TÉCNICOS