



INTERNATIONAL AEROBATIC CLUB APPLICATION FOR REGIONAL JUDGE CERTIFICATION

PLEASE PRINT LEGIBLY

						Date of Application
Name			Signature			IAC Number
Address Line 1			Home Phone	E-mail Address		IAC Chapters
Address Line 2			Other Phone	Last Judges School Attended		
City	State	Zip Code	Fax number	Instructor	Date Attended	

ASSISTING RECORD: In the table below, list IAC sanctioned events location, date of event, number and category of flights you assisted a grading judge (recording does not count, assisting the Chief Judge does not count) within the previous eighteen (18) months, using the following category codes:

P = Primary, S = Sportsman, I = Intermediate, IF = Intermediate Freestyle, A = Advanced, AF = Advanced Freestyle. U = Unlimited, UF = Unlimited Freestyle (assisting for Unlimited 4-Minute Freestyle does not count). Please distinguish glider flights assisted by placing a "G" suffix on the category code. Example: "4P, 17S, 6I, 6IF, 4A, 4AF, 6U, 6UF, 4UG" means you assisted a grading judge for 4 Primary, 17 Sportsman, 6 Intermediate, 6 Intermediate Freestyle, 4 Advanced, 4 Advanced Freestyle, 6 Unlimited, 6 Unlimited Freestyle, and 4 Unlimited Glider flights.

CONTEST LOCATION	DATE (mm/yy)	LIST ALL FLIGHTS WORKED AS AN ASSISTANT TO GRADING JUDGE

WRITTEN TEST: Present a copy of your graded "Regional Judge Exam" to the two IAC Judges (at least one must be a National Judge) who will be Administering the Practical Exam and then attach same to this application (applications prior to passing the "Regional Judge Exam" will not be accepted).

PRACTICAL EXAMINATION:	Location:	Date of Practical Exam
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We have reviewed with the applicant all incorrect responses on the Regional Judge Written Examination (attached) and the applicant has satisfactorily completed a Practical Examination jointly administered by the undersigned. We therefore recommend the applicant be certified as an IAC Regional Judge:

Printed Name of Examining Judge 1 (must be National)	Signature	IAC Number	Date
Printed Name of Examining Judge 2	Signature	IAC Number	Date

Send Completed Application to:

Greg Dungan, Chairman
IAC Judge Education and Certification Program
46152 Levitan Way
Great Mills, MD 20634-3066
Preferred: Scan and Email to greg.dungan@verizon.net

FOR IAC USE:

Regional Judge Exam Grade: _____ %

Date Written Exam Completed: _____