



IJS Protocol for Test Credit Request Form

Athlete's member #:	
E-mail contact:	
Phone contact:	
Coach's Name:	
Coach's E-mail:	
Coach's Phone:	
<i>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.</i>	
Coach's signature:	
Name of competition:	
Date of competition:	

Select the test you are requesting credit for:

SINGLES FREE SKATE TESTS		PAIRS TESTS		DANCE TESTS	
Juvenile (\$ xx)		Juvenile (\$ xx)		Juvenile (\$ xx)	
Intermediate (\$xx)		Intermediate (\$xx)		Intermediate (\$xx)	
Novice (\$xx)		Novice (\$xx)		Novice (\$xx)	
Junior (\$xx)		Junior (\$xx)		Junior (\$xx)	
Senior (\$xx)		Senior (\$xx)		Senior (\$xx)	
Adult Gold (\$xx)					

Please attach to this form:

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.

