

NOMINATION FOR LEVEL 2 REFEREE CERTIFICATION

Please complete all sections before sending to NZ Football



NAME OF CANDIDATE: _____ DoB: _____

FEDERATION: _____ REFEREE CENTRE: _____

LEVEL 1 CERTIFICATION

The above candidate has refereed more than 20 senior games and was certified as a Level 1 Referee on: _____

THEORY TEST

I hereby certify that the above named candidate has undertaken the Level 2 Course and passed the Level 2 Referees Test Paper A, B, C (circle which paper) as identified on the table beneath.

Date: _____

Co-ordinator: _____ (Print) _____ (Signature)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19

20	21	22	23	24	25	26	27	28	29	30	31	32	33

%

FITNESS TEST

NAME	Test 1	Test 2	Test 3	Test 4	Test 5	Test 6	Males < 7.0 seconds
SPEED TEST – 6 X 40m							Females < 8.0 seconds

LAP	1	2	3	4	5	6	7	8	9	10
INTERMITTENT HIGH INTENSITY TEST										

Men 150m in < 35 seconds, then 50m in 50 seconds. Women 150m in < 40 seconds, then 50m in 50 seconds.

Co-ordinator: _____ (Print) _____ (Signature) _____ (Date)

FIELD TESTS (to be conducted by 4 different inspectors/coaches)

I hereby certify that the above named candidate passed the **FIRST** field test. _____ (Date)

Chairman of Examiners: _____ (Print) _____ (Signature)

Inspector/Coach: _____ (Print) _____ (Signature)

I hereby certify that the above named candidate passed the **SECOND** field test. _____ (Date)

Chairman of examiners: _____ (Print) _____ (Signature)

Inspector/Coach: _____ (Print) _____ (Signature)

This form shall be handed to the named candidate when they have passed the fitness test. The candidate is responsible for ensuring that the correct signatures are entered at the conclusion of each successful Field Test before forwarding to: **NZ Football, PO Box 301-043, Albany, Auckland 0752**

NEW ZEALAND FOOTBALL USE ONLY

NOMINATION RECEIVED ON _____ / _____ / _____ APPROVED ON _____ / _____ / _____

BADGE NO. _____ LEVEL 2 CERTIFICATION _____

SIGNED _____ NZ FOOTBALL