



IJS Protocol for Test Credit Request Form

(for use by All Year FSC members only)

Athlete's Name	
Athlete's USFSA#	
Parent/Guardian Name, if under 18	
E-mail Contact	
Phone Contact	
REQUIRED IN ACCORDANCE WITH TR 4.00, A COACH MUST SIGN THIS FORM TO VERIFY THAT THE DOCUMENTS ARE CORRECT AND UNALTERED.	
Coach Name	
Coach E-mail	
Coach Phone	
<p>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 requirements is considered an ethics violation of U. S. Figure Skating and The Professional Skaters Association.</p>	
Coach's Signature (required)	
Coach's USFSA # (required)	
Today's Date (required)	
Name of Competition	
Date of Competition	

Circle the test that you are selecting credit for:

SINGLES Free Skate	PAIRS Free Skate	ICE DANCE Free Dance
Juvenile	Juvenile	Juvenile
Intermediate	Intermediate	Intermediate
Novice	Novice	Novice
Junior	Junior	Junior
Senior	Senior	Senior
Adult Gold		

Please attach Test Credit Packet from competition (signed copy of event results, individual protocol, and Test Credit Skater Report), along with payment of \$24 (checks payable to AYFSC), which covers the All Year administrative fee and the USFSA test fee. Return to your local All Year test chair or mail to Jayne Rendel, 3770 Deerlodge Circle, Corona, CA 92881. Please retain a copy of ALL paperwork for your records.