



# DANCE IJS TEST CREDIT REQUEST FORM

Candidates have 14 days from the time they achieved the requirements at a competition to submit their documents for test credit.

Home Club: \_\_\_\_\_

Test Date: \_\_\_\_\_

Skater's Name: \_\_\_\_\_

USFSA #: \_\_\_\_\_

Partner's Name (if applicable): \_\_\_\_\_

USFSA #: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, and Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Parent/Guardian or Adult's Skater's Signature: \_\_\_\_\_

**Coach's Statement: I have reviewed and approved the test application for this skater. I have seen the unaltered and correct scores, which match the protocol the skater 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. By signing this form, I am certified that I am compliant with U.S. Figure Skating coaching requirements, and I am up-to-date with PSA CER requirements.**

Coach's Name: \_\_\_\_\_ Coach's Signature: \_\_\_\_\_

Coach's Email: \_\_\_\_\_ Coach's Phone: \_\_\_\_\_

Coach's USFS #: \_\_\_\_\_

## ONE TEST PER APPLICATION AND A CHECK FOR EACH TEST

Level: indicate 1) Standard, 2) 21+ or 3) 50+ (Circle One)

Indicate 1) Partnered Free Dance or 2) Solo Free Dance (Circle One)

DANCE TEST	COST
Bronze	\$32.00
Pre-Silver	\$42.00
Silver	\$42.00
Pre-Gold	\$42.00
Gold	\$52.00

Please attach:

- 1) The overall results, which include names and signature of the Event Referee and Technical Controller.
- 2) The skater's individual protocol.
- 3) Your Test Credit Skater report from the competition.
- 4) Payment:
  - 1) check made out to Skokie Valley Skating Club or
  - 2) Zelle payment to [skokievalleysctreasurer@gmail.com](mailto:skokievalleysctreasurer@gmail.com) (Zelle name: SKOKIE VALLEY SKATING CLUB).

**Mail to:** Priscilla Mayer, Test Chair, 3533 Hawthorne Street, Franklin Park, IL 60131