

RANKING APPLICATION



PSA MEMBER # _____

PERSONAL INFORMATION

US FIGURE SKATING MEMBER # _____

Name _____

Address _____

City, State, Zip _____

Phone () _____ Fax () _____

Email _____

PSA Ratings Held: _____

STUDENT INFORMATION

US FIGURE SKATING MEMBER # _____

Student's Name _____

Length of time student trained with you (indicate dates): From _____ To _____

Level _____

Specific Event _____

Location _____ Date _____

Student Placement _____

Signature of Student _____

CRITERIA

1. Must be a current PSA member
2. Must have been the primary coach for a minimum of one year
3. Must have at least a registered rating in the discipline of your ranking
4. Must maintain and be current with PSA educational credits
5. Must be CER Category A compliant
6. Must have coached at designated junior or senior ISU events and skaters must have been appointed by an ISU recognized National Governing Body (NGB) or the ISU. In the case of U.S. competitors, they must have been appointed by the International Committee, the International Committee Management Subcommittee (ICMS) and/or Synchronized Management Subcommittee (SMS).

I verify that the information given is true and correct:

Applicant Signature _____ Date _____

Cost: \$35 Application, \$15 Upgrade

Mail To: Professional Skaters Association • 3006 Allegro Park SW • Rochester, MN 55902

Deadline: October 1, January 1, April 1, July 1