



# AFFIDAVIT

## » THIS FORM:

- Must be completed and returned to the PSA office within **two weeks** after attending the accredited program or credit will not be given
- Is for coaches who currently hold a rating. If you have passed the Basic Accreditation (BA) written exam or the Foundations of Coaching Course (FCC) you are considered rated.
- Is for non-rated coaches who plan to start the rating process (BA or FCC) **within one year**

RATED       NOT RATED

To fulfill PSA continuing education requirements, a rated professional must acquire **28 educational credits** in a three-year period to keep his/her Ratings active. (*E.g. 2015, 2016, 2017 – 28 credits*)

Each presentation or topic of 30 minutes to one hour attended constitutes **one credit**.

## » I ATTENDED/COMPLETED PSA PROGRAM:

- Annual Conference
- Ratings Prep (formerly PACE)
- Nationwide Seminar - Full Day
- Nationwide Seminar - Half Day
- State Workshop
- Apprentice Program
- Foundations of Coaching Course (FCC)
- Examiner Training
- Other \_\_\_\_\_

## PRE-APPROVED PROGRAM:

- » *You must attach a copy of the agenda/schedule to this form from the event*
- A combined maximum of **16 credits** allowed in a three-year period for ISI and/or U.S. Figure Skating events
    - ISI Event {conference, seminar, etc}
    - US Figure Skating Event
  - Maximum of **eight credits** allowed in a three-year period
    - USOC Event
    - ISU Event
    - Other i.e. Skate Canada \_\_\_\_\_

» **HELD IN:** City \_\_\_\_\_ State \_\_\_\_\_ Date \_\_\_\_\_

» **I AM CLAIMING THE FOLLOWING NUMBER OF PSA EDUCATIONAL CREDITS:** \_\_\_\_\_

*Do NOT leave blank*

*By signing below I certify that the information is true and correct:*

Name \_\_\_\_\_ PSA Number \_\_\_\_\_

Address \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

» **MAKE A COPY OF THIS FORM AND KEEP IN YOUR RECORDS FOR VERIFICATION**

## » RETURN COMPLETED FORM TO:

PSA  
3006 Allegro Park SW  
Rochester, MN 55902 or Fax to 507.281.5491

