

New Officials Accreditation and/or Reaccreditation Application Worksheets and on Green Assessment criteria:

Your details – complete in full & please print neatly:

Applicants Full Name			
Home Address			Postcode:
Applicants Club			
Region/Division			
State Controlling Body	Bowls Victoria, Suite 7/ 32-36 Camberwell Road, Hawthorn East, VIC 3123		
Contact Phone	(M):	(H):	
Email Address			
Date of Birth			Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> Other <input type="checkbox"/>
For Reaccreditation ONLY	Expiring Umpire/Measurer Certificate number:	Expiry Date:	BowlsLink National ID number:

New Accreditation Fees

Please tick the course you wish to undertake:		Course cost with Officiating Manual (Please tick)	Course cost without Officiating Manual (Please tick)
Marker	<input type="checkbox"/>	\$60.65	*\$20
Measurer	<input type="checkbox"/>	\$60.65	*\$20
National Umpire (includes Marker & Measurer components)	<input type="checkbox"/>	\$90.65	*\$50

New Reaccreditation Fees

Please tick the course you wish to undertake:		Course cost with Officiating Manual (Please tick)	Course cost without Officiating Manual (Please tick)
Marker	<input type="checkbox"/>	\$60.65	*\$20
Measurer	<input type="checkbox"/>	\$60.65	*\$20
National Umpire	<input type="checkbox"/>	\$60.65	*\$20

It is a requirement for all Candidates to possess the March 2021 BA Officiating Manual & the current Law Book in order to complete any component (the Officiating Manual is a one-off purchase if completing one or more of the above components). The cost is \$27 plus \$13.65 postage and handling in addition to the selected course fee stated above (costs include GST).

Instructions

In order to gain accreditation/reaccreditation the candidate must ensure that the first three (3) pages of this application are completed in full and:

1. Return all pages of the application form to Bowls Victoria by email: bowlsvic@bowlsvic.org.au
2. Return all pages of the application form by mail to: Suite 7, 32-36 Camberwell Road, Hawthorn East Victoria 3123.
3. PAYMENT: **SEND NO MONEY** - your identified Club will be invoiced.
4. Submit to the assessor your signed Australian Sports Commissions Code of Ethics/Bowls Australia – Official’s Code of Behaviour form (below).

No applications will be accepted unless your club committee endorses your application on next page.

Bowls Victoria Office use only	
Invoice number: _____	Date: / /

Endorsement of Applications by Club

The Club has no reservations about the suitability of the applicant for officiating at the level for which application is made. The Club will arrange opportunities for the applicant to practice and prepare for accreditation. The Club will offer the applicant an equitable share of available future Club officiating work to assist with reaccreditation every four years. The Club's recommendation of this application is recorded in the Club's committees meeting minute book of the meeting when application approved.

Club Secretary:

Name: _____ Signature: _____ Date: _____

These forms should be completed by the applicant and endorsed by the club secretary and the completed forms, forwarded to the Bowls Victoria Umpires Committee who is responsible for managing the process. The code of ethics form is to be retained by the applicant when the application is lodged.

Please ensure that you bring with you a pen/pencil, hat/cap, bowls shoes together with your BA Officiating Manual (mandatory requirement), in preparation for both the on green and theoretical components.

Bowls Australia Officials Code of Behaviour

1.	Respect the rights, dignity and worth of every humanbeing.	Within the context of the activity, treat everyone equally regardless of sex, disability, ethnic origin or religion.
2.	Ensure the athlete's time spent with you is a positive experience.	All athletes are deserving of equal attention and opportunities.
3.	Treat athlete as an individual.	Respect the talent, developmental stage and goals of each individual athlete.
4.	Be fair, considerate, and honest with athletes.	
5.	Be professional and accept responsibility for your actions.	Language, manner, punctuality, preparation and presentations should display high standards. Display control, respect, dignity and professionalism to all involved with the sport – this includes opponents, coaches, officials, administrators, the media, parents and spectators. Maintain appropriate records.
6.	Make a commitment to providing a quality service to your athletes.	Maintain or improve your current NOAS accreditation. Seek continual improvement through performance appraisal and on-going official education.
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8.	Any physical contact with athletes should:	Be appropriate for the situation.
9.	Refrain from any personal abuse.	Includes verbal, physical and emotional abuse. Be alert to any forms of abuse directed towards others from any source.
10.	Refrain from any form of harassment towards athletes.	This includes sexual and racial harassment, racial vilification and harassment on the grounds of disability.
11.	Provide a safe environment for competition.	
12.	Be a positive role model for your sport and athletes.	Both on and off the green.

Please refer to the [Harassment-Free Sport Guidelines](#) available from the Australian Sports Commission for more information on harassment issues.

Name: _____ Signature: _____ Date: _____

The assessor should tick the box that applies to the participant:

- The participant has demonstrated the competences and is competent.
- The participant has demonstrated some of the competencies above and is not yet competent.

My plan for development

(This box should contain the participant's plans for their continued development/how they can achieve the competencies.

For example, they may work with a mentor, watch other umpires in action, refer back to the handbook, be reassessed in a week's time etc.)

I, the assessor of the participant whose name appears below, confirm that I have observed this participant performing the duties of an Umpire Measurer Marker *(please tick the applicable word)* as per the criteria on the date stated and the results are recorded on this page.

To be completed after assessment:

Participant name: _____ Signature: _____ Date: / /

Assessor name: _____ Signature: _____ Date: / /

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Payment processed successfully? - Yes No Accreditation number: _____

Uploaded to the database - Yes No Expiry Date: / /

Signed: _____ Date: / /

BV Umpires Committee Chairman Endorsement and Accreditation/Reaccreditation sign-off.

Print Name: _____

Signed: _____ Date: / /