TEMPORARY CRISIS JUDGE (TCJ) APPLICATION

(each application is only good for the one test listed in this application)

Date: _______________

Temporary Crisis Judge Name: ________________________________

Address: __________________________________ City, State, & Country:___________

Zip or Postal Code: ______________ ASCA Membership Number: ________________

E-mail Address ______________________________________________

Experience Tracking (please include any titles in any organization, track laying experience, observing, training of tracking that you have done, or any other information that would let the tracking committee understand your knowledge of tracking or letter of recommendation from a current ASCA Tracking Judge):

_______________________________________________________________________________________

_______________________________________________________________________________________

I, __________________________________ hereby apply to be admitted into ASCA’s Temporary Crisis Judge Program.

I understand that both the admittance into the Temporary Crisis Judge Program and the qualification by ASCA as a Temporary Crisis Tracking Judge is a privilege, which can be removed/cancelled by ASCA at any time for any reason.

I hereby certify that I have read, am familiar with, will adhere to, and actively support and promote ASCA’s Judges Code of Ethics, ASCA’s codes, rules, decisions and procedures relating to Tracking Judges and Tracking Tests, and the Statement of Purpose in ASCA’s bylaws. I further will consistently display the highest level of ethical conduct, impartial demeanor, and professional comportment in my dealings with the Australian Shepherd Breed and my Judging responsibilities.

Temporary Crisis Judge Signature: ________________________ Date: ________________

Test Date & Location: __________________________________________

Name of Affiliate: ___________________________________________

Tracking Committee Chair: ____________________________________

Tracking Test Secretary: _______________________________________

Address: ___________________________________________________

City, State, & Country: _______________________________________

Zip or Postal Code: ______________ ASCA Membership Number: ________________

E-mail Address: ______________________________________________

☐ We will be proceeding with only 1 judge at this test. We attest that circumstances prevent us from hiring 2 judges.

☐ We will have 2 judges at this test. (complete one form per TCJ)

Tracking Secretary Signature: ________________________ Date: ________________