



Judging Accreditation Continuing Professional Educational Clinic Approval

Please complete the following form and fax or e-mail to the appropriate USA Gymnastics **AND** NAWGJ State, Regional, or National Officer for approval a minimum of three (3) weeks prior to the clinic.

Name-Clinic Organizer _____

USAG # _____ Date _____

*All Continuing Professional Education approved clinics require a USA Gymnastics sanction.

Check One: State Regional National

Name of Clinic _____

Date of Clinic _____

Location (City, State) _____

Total Number of Clinic Hours _____

Topics/Levels Covered _____

Clinician(s) _____

Continuing Professional Education Clinical Credit forms may be obtained on-line at https://usagym.org/PDFs/Women/Judges/Multi-trackclinicCPE_form.pdf Each judge is responsible for printing their own CPE clinic card prior to attendance at each approved clinical session, and presenting that card/form for a signature at the conclusion of the clinical session. Each judge is responsible to keep accurate documentation of their CPE.

Approved by _____ Approved by _____
USAG SACC, RACC, or RTCC NAWGJ officer SJD or RJD

Date _____ Date _____

USA Gymnastics and NAWGJ Officers: Please return a copy of this approved form by FAX to the USA Gymnastics National Office at 317-237-5069 or mail to:
Connie Maloney, USA Gymnastics, 132 E. Washington St. Suite 700, Indianapolis, IN 46204
Email: cmaloney@usagym.org