

# **NEW – LOCAL APPROVED ASSOCIATION**

# Your Checklist for Achieving Local Approved Association Status

(This form is for your records, it does not need to be returned to the MHSAA)

Due Date for Local Approved Association material is **JULY 1, 2018** 

\*\*\*For your records only, this page does not need to be returned to the MHSAA.\*\*\*

| 1 | Submit Resolution   |
|---|---|
| 2 | Submit Trainer Nominations (1 trainer required for each sport) (It is necessary to submit a nomination form for each sport that requires a trainer. Attendance at the train the trainer meeting is <u>required</u> every-other year. This is not a face-to-face meeting year). Please have them mark their calendar for <u>August 4, 2018</u> . |
| 3 | Provide Membership Roster (Your Roster <i>MUST</i> Include ID Numbers) (Updates to the roster will be done online once the Association is set up through MHSAA) (Online updates to members in good standing will need to be done throughout year)   |
| 4 | Submit Sport Meeting Schedules. (one form for each sport that requires training)  |
|   | Schedule and Conduct Rookie Training. (6 hours per sport)   |
|   | Schedule and Conduct Mechanics Training. (3 hours per sport)  |
|   | Schedule and Conduct General/Educational Training. (3 hours per sport)  |
| 5 | Submit Association Constitution (Please contact the MHSAA if you need a proto-type constitution to review, modify and use) The MHSAA recommends your board complete an annual review, make updates as necessary and annually distribute to your members.  |
| 6 | Attend Local Approved Association Meeting this year.  (Attendance required every other year with an online meeting requirement when face-to-face meetings not conducted) August 4, 2018 – Officiate Michigan Day II   |
| 7 | Update roster online during the year with Members in Good Standing (Baseball, Basketball, Football, Boys Lacrosse, Soccer, Softball, Volleyball and Wrestling)  |
| 8 | Mark your calendar: August 4, 2018 - Officiate Michigan Day II  |

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# **RESOLUTION**

for recognition as an MHSAA

# **NEW - LOCAL APPROVED ASSOCIATION**

Resolution year - August 1, 2018 through June 30, 2019

## THIS RESOLUTION IS DUE ON OR BEFORE JULY 1, 2018

| LOCAL APPROVED ASSOCIATION INFORMATION  |  |  |  |  |
|---|--|--|--|--|
| (MHSAA mailings and communications will be sent to the Association Contact)   |  |  |  |  |
|   | TION ZONE:   |  |  |  |
| FULL NAME OF ASSOCIATION:  ****Please do not use abbreviations; we have many Associations with similar abbreviation letters, THANK YOU.**** |  |  |  |  |
| ASSOCIATION PRESIDENT:  | MHSAA ID #   |  |  |  |
| E-MAIL ADDRESS:   |  |  |  |  |
| ASSOCIATION CONTACT PERSON:   | MHSAA ID #   |  |  |  |
| E-MAIL ADDRESS:   |  |  |  |  |
| *The Association contact person is the primary individual with whom continual communications with.  | n the MHSAA will list on line, direct others to contact and have |  |  |  |

#### **CIRCLE THE SPORTS SPONSORED BY YOUR ASSOCIATION:**

| BASEBALL      | GIRLS LACROSSE | TRACK/X-   |
|---------------|----------------|------------|
| BASKETBALL    | GYMNASTICS     | COUNTRY    |
| BOYS LACROSSE | ICE HOCKEY     | VOLLEYBALL |
| COMPETITIVE   | SOCCER         | WRESTLING  |
| CHEER         | SOFTBALL       |            |
| FOOTBALL      | SWIMMING       |            |

#### ROSTER OF TRAINERS OF OFFICIALS (Must qualify according to published criteria)

| SPORT   | NAME   | ID#           | FIRST YEAR          | MOST RECENT |  |  |
|---|--|---------------|---------------------|-------------|--|--|
|   |  |               |                     |             |  |  |
|   |  |               |                     |             |  |  |
|   |  |               |                     |             |  |  |
|   |  |               |                     |             |  |  |
|   |  |               |                     |             |  |  |
|   |  |               |                     |             |  |  |
| MEMBERSHIP - MIN  | NIMUM REQUIREMENTS                                 |               |                     |             |  |  |
| 15 or MORE (Zo  | ones 7 & 8: All Sports; <i>plu</i> s All           | Zones: BL, G  | L, GYM, IH, SO & SW | <b>'</b> )  |  |  |
| 30 or MORE (Zo  | ones 1-6: BA, BB, CC, FB, SB                       | , TR, VB, WR, | XC)                 |             |  |  |
| Association Member Roster's will be managed online by the Association President or Contact person as listed on the first page. Sports with MIGS requirements must also be maintained online throughout the year.  Deadlines for MIGS are as follows:  Fall – September 1st, Winter – December 1st, Spring – April 1st |  |               |                     |             |  |  |
| OTHER INFORMATI   |  |               |                     |             |  |  |
| ANNUAL BAN  | QUET DATE:   |               |                     |             |  |  |
| ASSOCIATION   | ASSOCIATION SPONSORED CAMPS/CLINICS: (Sport/Dates) |               |                     |             |  |  |
| If further information is provided to the MHSAA throughout the year, the MHSAA will assist in spreading the word via our webpage and emails announcing camps/clinics throughout the year.   |  |               |                     |             |  |  |
| ANNUAL ASSOCIATION DUES REQUIRED FROM MEMBERS: \$   |  |               |                     |             |  |  |
| LOCAL APPROVE   | ED ASSOCIATION "REGISTE                            | RED ASSIGNI   | ERS" THAT ARE MEN   | MBERS:      |  |  |
| Name:   |  |               | _Sports:            |             |  |  |
| Name:   |  |               | _Sports:            |             |  |  |
|   | MHSAA Registered Assigners                         |               |                     |             |  |  |

It is expected that MHSAA Registered Assigners follow all published "Standards for Registered Assigners." Any violation of these standards will place the Registered Assigner at risk of losing his or her registered status after review by MHSAA staff. The full policy is online, Officials tab, Resources and Policies page:

Regulations and Standards for MHSAA Registered Assigners

THIS RESOLUTION IS DUE ON OR BEFORE JULY 1, 2018







### TRAINER NOMINATION FORM

(Submit one form per Trainer being nominated)

### This form <u>MUST</u> be submitted and signed for all <u>FIRST TIME</u> Trainers

|                 |                          | "First time" Trainer   |
|-----------------|--------------------------|--|
| THE OFFICIAL BE |                          | ED AS A TRAINER IN THE SPORT OF:eparate forms for a multi-sport trainer) |
| Name:           |                          | MHSAA ID#:   |
| Email:          |                          |  |
|                 |                          | many Associations with similar abbreviation letters, THANK YOU. ****     |
| EXPERIENCE ("Fi | rst time" Trainers only) |  |
| FIRST YEAR OF R | EGISTRATION:             | TOTAL YEARS OF REGISTRATION:   |
| FIRST YEAR OF V | ARSITY EXPERIENCE:       | TOTAL VARSITY EXPERIENCE:  |
| EXPERIENCE TE   | EACHING (CERTIFIED/N     | ON-CERTIFIED)  |
| YEARS           |                          | DESCRIPTION  |
|                 |                          |  |
| COMMUNICATIO    | N SKILLS (Provide Exp    | lanation)  |
| EXPLAIN WHY C   | ANDIDATE WILL BE A "     | 'QUALITY TRAINER"  |
|                 |                          |  |
|                 |                          |  |
|                 |                          |  |
|                 |                          |  |

| TRAINER RESOLU  | ITION                                       |  |  |
|---|---|--|--|
| Trainer Name:   |   |  |  |
| I will participate in all training requirements, be an active member in good standing in an MHSAA Local Approved Association, attend or complete the MHSAA rules meetings, support and advance the MHSAA philosophy of officiating, adhere to MHSAA Regulations, practices and procedures and commit to being an empathetic and sensitive mentor. |   |  |  |
| Further, I understand that my status as a trainer candidate is subject to review by the MHSAA and may be denied or revoked if it is determined to be in the best interest of the MHSAA.   |   |  |  |
| Nominee Signature   | Date  |  |  |
| By checking this box, I am indicating that I WILL register for and attend Officiate Michigan Day II, August 4th at the Lansing Center from 9 am – 4 pm  Please make sure you have completed registration online for Officiate Michigan Day II.  |   |  |  |
| MHSAA TRAINING for the sports of Baseball, Basketb  | all, Competitive Cheer, Football, Gymnastic |  |  |

MHSAA TRAINING for the sports of Baseball, Basketball, Competitive Cheer, Football, Gymnastics, Ice Hockey, Boys Lacrosse, Girls Lacrosse, Softball, Soccer, Volleyball and Wrestling will take place August 4<sup>th</sup> at the Lansing Center, 333 E. Michigan Avenue, Lansing, 48933 from 9 am – 4 pm

#### TRAINER ENDORSEMENT FROM LOCAL APPROVED ASSOCIATION

| The official named is nominated to serve as a trainer of officials in the sport of<br>Local Approved Association as proclaimed by the full association membership. |      | for our |
|--|------|---------|
| Association Leader Signature/Title   | Date |         |

THIS FORM SHOULD BE USED FOR TRAINERS AND BE SIGNED BY BOTH THE NOMINATED TRAINER AND AN ASSOCIATION LEADER.

THIS FORM SHOULD BE RETURNED WITH YOUR LOCAL APPROVED ASSOCIATION MATERIALS.

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# LOCAL APPROVED ASSOCIATION Roster Form and Instructions

- 1. Write the Association Name in the space provided.
- 2. Please note that in Baseball, Basketball, Football, Boys Lacrosse, Soccer, Softball, Volleyball & Wrestling, only members in good standing, as defined by the MHSAA, can be considered for tournaments.
- 3. List the official's FULL name and MHSAA ID #. Official **must be currently registered** to be listed on your association roster.
- 4. Do not include any person on your roster who has not willingly requested to be included.
- 5. Due Date for Local Approved Association material is JULY 1, 2018

#### **Association Name:**

\*\*\*\*Please do not use abbreviations; we have many Associations with similar abbreviation letters, THANK YOU.\*\*\*\*

#### (You must include ID numbers of the officials you are adding to your roster)

| (Officials <i>must</i> be current              | ly registered) | (Officials <i>must</i> be currently registered)  Full Name  MHSAA ID # |            |  |
|--|----------------|--|------------|--|
| (Officials <i>must</i> be current<br>Full Name | MHSAA ID #     | Full Name  | MHSAA ID # |  |
|  |                |  |            |  |
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This form must accompany your LOCAL APPROVED ASSOCIATION material.



**Association:** 





# REQUIRED LOCAL APPROVED ASSOCIATION MEETINGS

(For the Resolution year - August 1, 2018 through June 30, 2019). Meetings listed below are for the 2018-19 season. All meetings should be scheduled for dates **AFTER August 1, 2018**)

Due Date for Local Approved Association material is JULY 1, 2018

| ****Please do not use abbreviations; we have many Associations with similar abbreviation letters, THANK YOU.**** |                 |                                |                |   |
|--|-----------------|--------------------------------|----------------|---|
| Meeting Schedule for the Sport of:   |                 |                                |                |   |
|  |                 | (Use one form pe               | r sport)       |   |
| GENERAL/EDUCATION  |                 | · '                            |                | <u> , </u>  |
|  |                 |                                |                | ETINGS PER YEAR, PER SPORT<br>RING THE SPORT SEASON |
| FOR WHICH THEY A   | RE REGISTERED,  | START                          |                | RING THE SPORT SEASON                               |
| TRAINER  | DATES           | TIMES                          | LENGTH<br>OF   | LOCATION  |
| INAINEN  | (3 required)    | (Please indicate               | TRAINING       | (Must have <u>specific</u> locations)               |
|  |                 | a.m. or p.m.)                  |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
| MECHANICS TRAINING SCHEDULE  A MECHANICS CLINIC OF AT LEAST 3 HOURS IS REQUIRED ANNUALLY IN                      |                 |                                |                |   |
|  | SPORT FOR WHIC  |                                |                |   |
|  |                 | START                          | LENGTH         | LOCATION  |
| TRAINER  | DATES           | TIMES                          | OF             | LOCATION (Must have <u>specific</u> locations)      |
|  |                 | (Please indicate a.m. or p.m.) | TRAINING       | (Must have <u>specinc</u> locations)                |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
| ROOKIE TRAINING SC   | HEDULE          |                                |                |   |
| 6 HOURS  | OF "ROOKIE" TRA |                                |                |   |
| PREPARE NOVICE OFFICIALS FOR LOWER LEVEL REGULAR SEASON OFFICIATING  |                 |                                |                |   |
| <b>TD AINIED</b>   | 5.4770          | START<br>TIMES                 | LENGTH         | LOCATION  |
| TRAINER  | DATES           | (Please indicate               | OF<br>TRAINING | (Must have specific locations)                      |
|  |                 | a.m. or p.m.)                  | IIIAIIIII      |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |
|  |                 |                                |                |   |



# **2018-19 IMPORTANT DATES**

For Approved Associations, Registered Assigners and Leagues/Conferences.

| • | Recommendation forms due from Approved            | Monday, Sept. 1, 2018 |
|---|---|-----------------------|
|   | Associations, Leagues & Conferences               |                       |
| • | Submission of member-in-good standing list (MIGS) | Monday, Sept. 1, 2018 |
| • | Registered Assigner correspondence due            | Monday, Sept. 1, 2018 |
|   |   |                       |

#### **ALL WINTER SPORTS RECOMMENDATIONS\***

| • | Recommendation forms due from Approved            | Monday, Dec. 1, 2018         |
|---|---|------------------------------|
|   | Associations, Leagues & Conferences               |                              |
| • | Submission of member-in-good standing list (MIGS) | Monday, Dec. 1, 2018         |
| • | Registered Assigner correspondence due            | Monday, Dec. 1, 2018         |
|   | ·   | ·                            |
|   |   | *Ice Hockey January 10, 2019 |

#### ALL SPRING SPORTS RECOMMENDATIONS

| • | Recommendation forms due from Approved            | Wednesday, April 1, 2019 |
|---|---|--------------------------|
|   | Associations, Leagues & Conferences               |                          |
| • | Submission of member-in-good standing list (MIGS) | Wednesday, April 1, 2019 |
| • | Registered Assigner correspondence due            | Wednesday, April 1, 2019 |

2018 SUMMER MEETINGS....August 4, 2018 Officiate Michigan Day II

2021 SUMMER MEETINGS: Dates TBA
Officiate Michigan Day III in conjunction with the National Association of Sports
Officials (NASO) Sports Officiating Summit, Grand Rapids, MI