



# Official's Internship Program Application

## PERSONAL INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle \_\_\_\_\_ USTA No. \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Height \_\_\_\_\_ Weight \_\_\_\_\_ Sex \_\_\_\_\_

Home Phone \_\_\_\_\_ Mobile Phone \_\_\_\_\_

Email address \_\_\_\_\_

When did you have your last physical exam? \_\_\_\_\_

Do you have any physical handicaps or limitations? \_\_\_\_\_

When did you have your last eye exam? \_\_\_\_\_

What vision do you have? Without Correction Right 20/\_\_\_\_ Left 20/\_\_\_\_

With Correction Right 20/\_\_\_\_ Left 20/\_\_\_\_

## EDUCATION

School	Name/ Location of School	Course of Study	Years Completed	Degree or Diploma
High School				
College				
Graduate				
Other				

## EMPLOYMENT HISTORY (LIST MOST RECENT FIRST)

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Employment Dates (Month/Year)

Name of Supervisor \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Job Title and Description of Work \_\_\_\_\_

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Employment Dates (Month/Year)

Name of Supervisor \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Job Title and Description of Work \_\_\_\_\_

Company Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Employment Dates (Month/Year)

Name of Supervisor \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

Job Title and Description of Work \_\_\_\_\_

## EXPERIENCE AS AN OFFICIAL

Year	Track Official You Served Under	Capacity You Served
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Have you served as an official in other sports? \_\_\_\_\_ If yes, describe below.

Year	Sport	Capacity You Served
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Do you have any other experience that will help you as a harness racing official?

## INDUSTRY REFERENCES

Give the names of at least three people who are active in the Standardbred industry as references. (Racetrack management, industry organization personnel and/or racing officials preferred.)

Name	Position	City and State
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## SIGNATURE

I hereby apply for an internship position with the USTA Official's Training Program. I understand that, upon my acceptance to the program, that I will be required to relocate for a period of six to eight weeks for schooling and training.

I hereby confirm that the information and statements contained herein are correct to the best of my knowledge. In applying for an internship position with the USTA, I agree to abide by and all USTA Rules and Regulations and Bylaws. I understand that any violation of the rules will be considered grounds for denial and may result in a fine, suspension or expulsion.

I authorize the USTA to contact and obtain information about me from previous employers, educational institutions and "references" I provided, and any other party necessary to verify the accuracy of information I disclosed in this application.

To assist in the processing of my application, I waive all rights and claims I may otherwise have against the USTA or its representatives, for seeking, and using information to evaluate my consideration for the USTA Official's Internship Program and all other persons, corporations or organizations who provide information for this purpose.

I understand that, if accepted as an intern, I must satisfactorily complete all requirements of the program. I further understand that completion of the program does not place any obligation or guarantee on the USTA to find me employment as a racing official.

I fully understand and accept all terms and conditions in the above statements.

Applicant Signature

Date

**\*\*\*A personal statement, typed or handwritten, providing a detailed explanation as to why you feel you should be selected as an intern for the USTA Official's Internship Program must be included with this application.**



U.S. Trotting Association

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