UNITED COUNTRY WESTERN DANCE COUNCIL® APPLICATION FOR JUDGE CERTIFICATION



An applicant must have at least 5 years of current professional training & teaching experience at the competitive level.

Please be sure to submit all documents detailed in the application instruction document.

Judge Certification Type: (Please check all that apply)

Line Cert	ification	Partner Certification	Dual Certification	
SURNAME (last name):		GIVEN NAME (first name):	DATE OF BIRTH:	
STREET/BOX ADDRESS	<u>;</u> :			
CITY:	STA	ATE/PROVINCE/COUNTRY:	ZIP/POSTAL CODE:	
CELL#:	DO YOU TEXT? :	HOME #:	WORK #:	
EMAIL ADDRESS:			UCWDC® Associate Member #:	
UCWDC Endorse	r # 4			
urrently paid that the above ledge that said information	ve stated information n can be further deta	and the enclosed résumé are true and correct	to the best of my recollection and estimation. I also remission to the UCWDC® Judge Certification	
gnature:			Date	
udgecertification@ucneeting is January 15 Please be sure we receequirements by the d	wdc.org. Deadli th. Please be sure eive 4 letters of r eadline your app	to submit: Fully completed application ecommendation by the review deadling	ment. Please submit paperwork to gust 1 st . Deadline for review at the spring on, photo, resume and required questions. e. In the event we do not have all necessa ents are met. This may result in reviewing	