

Application for WBTF Clinician Status

Name _____

Country _____

Judging Status _____

Date of Certification _____

List Focus Meetings you have Lead

Date	Subject Matter	Hosting Organization/Individual

List Certification Programs you have been responsible for presenting and/or developing.

Date	Project Name	Subject Matter	Hosting Organization/Individual

Other Skills that make you a Qualified Technician (e.g., Teaching Degree)

Skill	Description

Domestic Judging Experience

Date	Competition	Host Organization/Individual

International Judging Experience

Date	Competition	Host Organization/Individual

Native Language:

Other Languages Spoken:

List your relevant Technology Skills

Skill	Description

Signature _____

Sponsoring Clinician Name & Signature _____

Submit this application to Jackie Stewart, WBTF Judges Chair, at 10jstew09@gmail.com.