**Worcestershire FA Referee Mentoring Scheme – Application Form**

This form must be completed accurately, in full and returned by email before a mentor will be appointed.

**TO BE COMPLETED BY REFEREE**

|  |  |
| --- | --- |
| **Name of Referee** |  |
| **Current Age of Referee** |  |
| **Date of Birth of Referee** |  |
| **Email Address of Referee** |  |
| **Mobile Number of Referee** |  |
| **Location (Town/City)** |  |

**IF REFEREE IS AGED UNDER 18 THIS SECTION MUST BE COMPLETED BY PARENT/CARER**

|  |  |
| --- | --- |
| **Name of Parent/Carer** |  |
| **Relationship to Referee** |  |
| **Email Address of Parent/Carer** |  |
| **Mobile Number of Parent/Carer** |  |

**Note:** Parent/Carer will be copied in to emails regarding the mentor scheme for referees aged under 18.

*By completing this form I wish for the referee named to be appointed a mentor to support them as a match official. I am happy for a mentor to be assigned and I agree for contact to be made with the referee by the mentor. I understand what the mentoring scheme is about as I have received the document ‘****WFA Mentoring Information****’ and I have had the opportunity to ask any questions. I also understand who to contact if I have any issues with the scheme (details below).*

An electronic signature or full name typed into the box is acceptable.

|  |  |
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| **Signed by Referee** |  |

|  |  |
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| **Signed by Parent/Carer if U18** |  |

**Please email this completed mentor application form to:** **referees@worcestershirefa.com**

If you have any questions about the mentoring scheme please contact:

**Ollie Williams – Referee Development Manager**

E: Ollie.Williams@worcestershirefa.com

T: 07786 570602

*Ends*