

**2005-2006 SES INDIVIDUAL VERIFICATION REQUEST FORM**

Please legibly print all requested information. This form must be submitted to the LSC NTV Chair within **one week** of the last day of the competition. Some meets require that this form be submitted prior to the swim. Check in advance to determine which procedures are in effect for this competition. Turn in completed form to LSC Verification officer or the designated person/location. **Data entry for proof of times subject to verification that competition was conducted in conformance with all applicable USA Swimming Rules & Regulations.** Administrative fees, payable to SES, must accompany this form. Refer to the SES Policy for fee details.

Swimmer Name (as registered with USA-S): \_\_\_\_\_

USA-S ID# \_\_\_\_\_ Date of Birth \_\_\_\_\_ F M

Club Code: \_\_\_\_\_ LSC: \_\_\_\_\_

Name of Meet: \_\_\_\_\_ First Day of Meet: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Meet Referee: \_\_\_\_\_

Event #	Distance/Stroke (i.e.-100 Freestyle)	Course SCY, SCM, LCM)	Time	Flag (See Below)	Session (See Below)

Session: Prelims, Finals, Time Trials, Lead-off, Swim-off      Flag: JN = Junior National; R = Reportable Time

Mail completed form to:  
Trish Mitchell, SES NTV Chair, 3020 Keller Bend Road, Knoxville, TN, 37922-6521  
9/27/05