



# Utah High School Activities Association

199 East 7200 South, Midvale, Utah 84047

Phone (801)566-0681 / Fax (801)566-0633

## Form: Swimming State Record Application

In order for a state swimming record to be claimed outside of the UHSAA State Swim Meet the following criteria must be met:

1. The swimming pool must be a minimum of 25 yards in length as certified by an inspector.
2. The event must be an approved UHSAA sanctioned event and adhere to UHSAA rules.
3. The claimed time must be accurately recorded by an approved fully automatic timing device (i.e. Colorado, Daktronic with touch pads).
4. The meet must have a certified starter and a minimum of four (4) additional certified deck officials.
5. The meet must adhere to the National Federation Swim Rules.
6. A completed application form, containing the certifying signatures, must be received by the UHSAA office no later than two weeks after the swim meet listed on this form was held.

Application for a **STATE RECORD** in  Boys  Girls \_\_\_\_\_  
*Event*

The **TIME** claimed as a new UHSAA State Record was: \_\_\_\_\_

Name of Meet \_\_\_\_\_ Date of Meet \_\_\_\_\_

Meet Director \_\_\_\_\_ Location of Meet \_\_\_\_\_

Type of meet \_\_\_\_\_ Number of participating schools \_\_\_\_\_

Full name(s) of competitor or relay team members for whom the record is claimed:

\_\_\_\_\_ Grade \_\_\_\_\_ Age in: Yrs \_\_\_\_\_ Months \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_ Age in: Yrs \_\_\_\_\_ Months \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_ Age in: Yrs \_\_\_\_\_ Months \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_ Age in: Yrs \_\_\_\_\_ Months \_\_\_\_\_

Claimed School \_\_\_\_\_ Check: 1A \_\_\_\_\_ 2A \_\_\_\_\_ 3A \_\_\_\_\_ 4A \_\_\_\_\_ 5A \_\_\_\_\_ 6A \_\_\_\_\_

Head Coach \_\_\_\_\_ Signature \_\_\_\_\_

Athletic Director \_\_\_\_\_ Signature \_\_\_\_\_

*As the school principal, I personally verify that the student-athlete(s) identified on this form meet all UHSAA standards of enrollment and eligibility.*

Principal \_\_\_\_\_ Signature \_\_\_\_\_

**CERTIFICATES in SUPPORT of the CLAIM for a STATE SWIM RECORD**

**CERTIFICATE OF POOL LENGTH.** I certify that the swimming pool listed on this form was accurately measured and the length was a minimum of 25 yards. This pool meets the standards required for a record.

Inspector \_\_\_\_\_ Signature \_\_\_\_\_

**CERTIFICATE OF MEET DIRECTOR.** I certify that this was a sanctioned UHSAA swim meet with a certified starter and a minimum of four (4) additional certified deck officials. I certify that the criteria required for a state record were met in full compliance with NFHS rules.

Director \_\_\_\_\_ Signature \_\_\_\_\_

**CERTIFICATE OF STARTER.** I certify that I am a certified swim official and I was the starter for the swim event listed on this form. It was a fair start and no advantage was given to or taken by the claimant.

Starter \_\_\_\_\_ Signature \_\_\_\_\_

**CERTIFICATE OF TIMER.** I certify that the time listed on this application form is the exact time recorded at the meet and that the time was accurately recorded by an approved fully automatic time device.

Timer \_\_\_\_\_ Signature \_\_\_\_\_

**CERTIFICATE OF DECK OFFICIALS.** I am a certified swim official and was present at the meet in question and certify that the claimed record time listed on this application was earned legally in full compliance with NFHS rules by the individual(s) identified on this form.

Official \_\_\_\_\_ Signature \_\_\_\_\_

Official \_\_\_\_\_ Signature \_\_\_\_\_

Official \_\_\_\_\_ Signature \_\_\_\_\_

Official \_\_\_\_\_ Signature \_\_\_\_\_

**STATEMENT OF REFEREE.** I certify this was a sanctioned UHSAA swim meet with a certified starter and a minimum of four (4) additional certified deck officials. The certified officials who have attached their signatures to this application performed their duties in compliance with NFHS rules and the claimed record time listed on this form was earned legally in full compliance with NFHS rules by the individual(s) listed on this form. I recommend this claim to the Executive Committee for consideration as a state record.

Referee \_\_\_\_\_ Signature \_\_\_\_\_

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Date the application was accepted as a state record by the Executive Committee: \_\_\_\_\_

UHSAA Executive Director Signature \_\_\_\_\_ Date \_\_\_\_\_