



FIFA Fitness Test Form for National List Officials

Last Name: _____ First Name: _____

Test Date: _____ Test Location: _____

Participant Classification: _____

Reference Times:

<u>Classification</u>	<u>Sprint Test</u>	<u>Interval Test</u>
	40 m	min 4000 m
FIFA Referee	max 6.2"	30" / 35"
FIFA Assistant Referee	max 6.0"	30" / 40"
National Referee	max 6.2"	30" / 35"
National Assistant Referee	max 6.0"	30" / 40"
Nominated National Male	max 6.0"	30" / 40"
Nominated National Female	max 6.6"	35" / 40"
FIFA Female Referee	max 6.6"	35" / 40"
FIFA Female Assistant Referee	max 6.4"	35" / 45"

** Officials nominated to the National Program must successfully complete the Fitness test to the 'Nominated National' standard for males and females. Upon being selected by the CSA Referees Committee to join the National List, he/she must then successfully complete the fitness test prior to the start of the season to the standard as directed by the Committee.*

Participant Times:

<u>Sprint Test</u>							<u>Interval Test</u>
40 m	40 m	40 m	40 m	40 m	40 m	40 m	(min 4000 m)
1	2	3	4	5	6	7	

Test administered by: _____

Signature: _____ Date: _____

*** Test may only be supervised by a member of the CSA Referees Committee, CSA Staff member, CSA Fitness Coach or an individual appointed/approved by the CSA.**

Participant Signature: _____ Date: _____

