



Northeastern New York Section

# 2021 PRE-ASSOCIATE APPLICATION FORM

Membership into this classification is eligible for the current calendar year. A one year extension request for a 2<sup>nd</sup> year of classification for Pre-Associate eligibility can be submitted by completing the appropriate areas below.

## Personal Information

Full Name \_\_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_

Home Address \_\_\_\_\_

City/State \_\_\_\_\_ Zip \_\_\_\_\_ SS# \_\_\_\_\_

Do you prefer to have mail sent to: \_\_\_\_\_ Facility \_\_\_\_\_ Home

Cell Phone # \_\_\_\_\_ Email Address \_\_\_\_\_

## Education

High School Attended \_\_\_\_\_ Graduation Date \_\_\_\_\_

College Attended \_\_\_\_\_ Degree Earned \_\_\_\_\_

## Employment Verification

Name of Employer \_\_\_\_\_

Name of Facility \_\_\_\_\_

Is employment on a full-time basis (minimum of 40 hours per week) YES or NO \_\_\_\_\_

Indicate duties performed by percentage of the time spent in each duty (equal to 100%). The employer must provide the following information before an applicant can be processed.

- |                             |                         |                        |                   |
|-----------------------------|-------------------------|------------------------|-------------------|
| _____ Teaching              | _____ Inventory Control | _____ Bag Room         | _____ Club Repair |
| _____ Bookkeeping           | _____ Working on Course | _____ Handicap Reports | _____ Ranger      |
| _____ Tournament Operations | _____ Merchandising     | _____ Starting         |                   |

## Playing Ability Test (PAT) History

Have you attempted a PAT? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, did you pass? Yes \_\_\_\_\_ No \_\_\_\_\_

During a PAT Round, did you record a score within five shots of the one round target score? Yes \_\_\_\_\_ No \_\_\_\_\_

If you have not attempted a PAT, are you registered to take one in Current Year? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, where are you registered for the event and what is the date? Site \_\_\_\_\_ Date \_\_\_\_\_

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## Professional Work Record

Complete the following beginning with your most recent employment. NOTE: Give exact dates of full time employment (indicate month, day, year). If employment is seasonal, give specific beginning and ending dates of each season.

Dates	Club	Employer
From _____ To _____	_____	_____
From _____ To _____	_____	_____
From _____ To _____	_____	_____
From _____ To _____	_____	_____
From _____ To _____	_____	_____
From _____ To _____	_____	_____

\_\_\_\_\_  
*Signature of Pre-Associate* \_\_\_\_\_ *Date*

\_\_\_\_\_  
*Signature of Employer or Club Official* \_\_\_\_\_ *Date*  
 (Class A Member for Assistant, Club Official  
 for Non-Member Head Professional)

REGISTRATION FEE:     ***Make checks payable to “Northeastern New York PGA”***  
                                   All fees are non-refundable

\_\_\_\_\_ Pre-Associate - \$175  
                                   *(1<sup>st</sup> year classification, supervised by a Class A PGA Professional, and NOT registered in PGA PGM Program)*

\_\_\_\_\_ Non-Member Head Professional - \$175  
                                   *(1<sup>st</sup> year classification, NOT supervised by a Class A PGA Professional, and NOT registered in PGA PGM Program)*

\_\_\_\_\_ 2<sup>nd</sup> year extension granted - \$200  
                                   *(2<sup>nd</sup> and final year of classification and must adhere to NOT registered in PGA PGM Program)*

Please return to: NENY PGA Section; 418 Consaul Rd, Schenectady, NY 12304 or email to [ctorres@pgahq.com](mailto:ctorres@pgahq.com)  
 with a check  
 enclosed or  
 completed  
 credit card  
 information     PH: (518) 438-8645

Discover \_\_\_ Mastercard \_\_\_ Visa \_\_\_ AmEx \_\_\_

CC# \_\_\_\_\_

Security Code \_\_\_\_\_  
 Expiration Date \_\_\_\_/\_\_\_\_

Billing Zipcode: \_\_\_\_\_

# **NENY PGA Pre-Associate REQUIREMENTS for EXTENSIONS**

- **Note that this contract form is only applicable to 2<sup>nd</sup> year Pre-Associates to complete**

## **Policies & Requirements**

\* Upon the Board of Directors decision (May 9, 2017), the following requirements MUST be adhered to grant an individual an Extension (2<sup>nd</sup> year) of eligibility as a NENY PGA Pre-Associate classification

\* Individual must complete the Pre-Associate "Extension" Application and this Extension Policies/Requirement form.

\* For those individuals working at a facility under the supervision of a Class "A" PGA Member, this Extension Policies/Requirement form must also have the Class "A" Professional's signature.

\* Individual must submit payment of the Pre-Associate Extension fee to the NENY PGA (\$200)

\* It is the individual's responsibility to provide documentation (i.e., receipts; PGA HQ confirmation notices, etc.) to the NENY PGA Section office for successful completion of the identified steps below by the stated deadline dates

\* If the individual does not meet an action step below by the stated deadline, their Pre-Associate eligibility would be null and void and that individual would no longer have any classification/standing with the NENY PGA and would not be eligible for any refund of the fee.

\* If the individual progresses and meets the action steps below by the stated deadline, their classification will remain active for the season with the section.

For instance (Below is JUST an example) of the some possible dates and the "pre-requirements" that must be accomplished to register into the program:

### **Annual Timeline/Deadline Dates**

### **Progression Steps/Action**

1) April 30<sup>th</sup>

Register for the PGA Background Check

2) May 1<sup>st</sup>

Register for a minimum of 2 P.A.T's. that will take place by July 15th

*\* P.A.T.'s may be taken in any PGA Section*

3) July 15<sup>th</sup>

At minimum, have shot a 18-hole qualifying target score in a P.A.T.

4) August 1<sup>st</sup>

Register for the Pre-Qualifying Level

*\* individual has 6 months to pass the Qualifying Level Test*

5) February 1<sup>st</sup> (of next year)

Register into the PGA PGM Program by completing the application and all applicable payments

Applicant's Signature: \_\_\_\_\_

And

Class "A" PGA Member Supervisor Signature: \_\_\_\_\_

OR

Club Official/Owner/Manager for non-Supervised PGA Professional: \_\_\_\_\_