

STATE ATHLETIC COMMISSION  
Idaho Division of Occupational and Professional Licenses  
11341 W. Chinden Blvd., Bldg. #4, Boise ID 83714 or  
P.O. Box 83720, Boise ID 83720-0063  
Phone: (208) 334-3233 Website: <https://dopl.idaho.gov>  
E-mail: [atc@dopl.idaho.gov](mailto:atc@dopl.idaho.gov)

**APPLICATION INSTRUCTIONS FOR LICENSURE AS AN OFFICIAL OR NON-COMBATANT**

Please complete this form by providing the requested information (please print) and the required fees. Your signature must be notarized and any supporting documentation must be attached. **Incomplete applications that do not include all the items required (excluding those items that must be sent directly to our office from an issuing authority) will delay licensure.** Submit the completed form to the address noted.  
**NOTE: ANY ACTIVITY PRIOR TO OBTAINING A VALID LICENSE IS UNLAWFUL AND MAY RESULT IN CRIMINAL PROSECUTION AND DENIAL OF YOUR RIGHT TO LICENSURE.** Please note applications for licensure must be submitted at least two weeks prior to the event in which the ring official wishes to participate.

**Checklist for Combatant Application:**

- Complete signed and notarized application with notary seal and required fees.
- Application fee of \$150.00. FEES ARE NOT REFUNDABLE. Please make checks and money orders payable to DOPL. All returned checks are subject to a \$20.00 fee and the application will be invalid.
- Proof of identification – a clear and readable copy of a government-issued photo ID such as a passport, military ID, or valid driver’s license is acceptable.
- If you answered ‘Yes’ to question #7, 8, or 9; Documentation as it relates to the question(s) for which you answered Yes.
- Referee, Judge, Timekeeper, or Glover Addendum, if applicable.
- Copy of legal name change, if applicable (marriage license, divorce decree or court order). This is applicable if the name used on any accompanying documents, such as transcripts or proof of age, does not match the name on the application.
- Please keep a copy of this application for your records.

**ATTENTION MEMBERS AND SPOUSES OF MEMBERS OF THE ARMED SERVICES**

If you are a member of the armed forces, an honorably discharged veteran or the spouse of an active member or veteran of the military, you are entitled to certain benefits because of your service. Those benefits may include expedited processing of your application and credit for military training that is relevant to the occupational license/registration for which you are applying. For a full explanation of eligibility and a comprehensive description of benefits available, see [Idaho Code §§ 67-9401-9407](#). Additionally, active members of the military may be eligible for a waiver of renewal fees and other renewal requirements, see [Idaho Code § 67-2602A](#).

- To utilize experience or education gained in the military to qualify you for this license/registration, please attach a copy of your DD-214.



**STATE ATHLETIC COMMISSION  
APPLICATION FOR LICENSURE**

**ADDENDUM**

**REFEREE, JUDGE, TIMEKEEPER, or GLOVER  
(this addendum is not required for Second or Manager applicants)**

**\*\*EACH APPLICANT FOR LICENSE AS A REFEREE, JUDGE, TIMEKEEPER OR GLOVER SHALL MEET THE FOLLOWING REQUIREMENTS:**

1. Have had at least one (1) year documented experience in either amateur or professional boxing, wrestling, or martial arts as a referee, judge, timekeeper, or glover, whichever is appropriate; and
2. Submit verifications from three (3) persons of the applicant's proficiency as a referee, judge, timekeeper, or glover, whichever is appropriate; and
3. The commission may accept satisfactory evidence of equivalent qualifications possessed by an applicant who is currently licensed in another state or country; or who formerly held a Idaho license which lapsed in good standing.

A. WORK EXPERIENCE: List your work experience including employers names, addresses, phone numbers and dates of practice.  
**My experience in: ( ) Boxing ( ) Wrestling ( ) Mixed Martial Arts as a**

**( ) Referee ( ) Judge ( ) Timekeeper ( ) Glover**

**is as follows:**

**EMPLOYER'S NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE NO.** \_\_\_\_\_ **DATES of PRACTICE From** \_\_\_\_/\_\_\_\_/\_\_\_\_ **to** \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy mm dd yyyy

**EMPLOYER'S NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE NO.** \_\_\_\_\_ **DATES of PRACTICE From** \_\_\_\_/\_\_\_\_/\_\_\_\_ **to** \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy mm dd yyyy

**EMPLOYER'S NAME** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_

**PHONE NO.** \_\_\_\_\_ **DATES of PRACTICE From** \_\_\_\_/\_\_\_\_/\_\_\_\_ **to** \_\_\_\_/\_\_\_\_/\_\_\_\_  
mm dd yyyy mm dd yyyy

**If more space is needed, attach a separate sheet of paper**

**B. CHARACTER REFERENCES: Please provide below the names and current contact information (name, address, & phone) of three references who can attest to your proficiency as a referee, judge, or timekeeper.**

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____