



## **Application for Professional Combative Sport Second/Trainer or Matchmaker License**

*Read the instructions carefully before completing the application. Incomplete applications will be returned, delaying licensure. Any omission, inaccuracy or failure to make full disclosure in an application or supporting documentation may be deemed sufficient reason to deny a license, or, if a license is issued could result in the suspension or revocation of a license.*

### **What is the fee and term for a Professional Boxing Second/Trainer and Matchmaker License?**

The fee for a Boxing Second/Trainer License is \$10.00. The fee for a Boxing Matchmaker License is \$50.00. The License is valid until the September 30<sup>th</sup> following the date the licensed is issued.

### **What is the fee and term for a Professional Mixed Martial Arts Second/Trainer and Matchmaker License?**

The fee for a Mixed Martial Arts Second/Trainer License is \$40.00. The fee for a Mixed Martial Arts Matchmaker License is \$100.00. The License is valid for one year from the date the license is issued.

### **When do I apply for an original license?**

You can apply for an original license at any time. However, if you plan to participate in a scheduled event, you are encouraged to submit your license application and required documentation two weeks prior to that event to allow for adequate processing time.

### **When do I renew my license?**

You can renew your license three months prior to and three years beyond the license expiration date. If you fail to renew within the three year deadline, you must submit an original license application with the required documentation.

### **Why do I need to provide my email address?**

You will receive your license and any correspondence related to your license or application by email. If your email address changes, submit an amendment application to this office providing the new email address.

### **What documents are required with my application?**

- Copy of an unexpired government issued photo ID – NOT REQUIRED FOR RENEWAL
- Combative sport resume and list of references – NOT REQUIRED FOR RENEWAL
- Documentation supporting your "YES" response(s) to the questions in the "Background Information" section of this application
- \$10.00 application fee for Boxing Second/Trainer License
- \$50.00 application fee for Boxing Matchmaker License
- \$40.00 application fee for Mixed Martial Arts Second/Trainer License
- \$100.00 application fee for Mixed Martial Arts Matchmaker License

### **What is a combative sport resume?**

A resume outlining a summary of your relevant boxing or mixed martial arts license qualifications and experience,

education and/or training and licenses and/or certifications.

### **What forms of Payment do you Accept?**

You may pay by check or money order made payable to the Department of State. Do not send cash. **Application fees are nonrefundable.** A \$20 fee will be charged for any check returned by your bank.

### **How do I submit my application and supporting documentation to the State Athletic Commission?**

Mail to: New York State, Department of State  
State Athletic Commission  
P.O. Box 22090  
Albany, NY 12201-2001

### **Child Support Statement section of the application**

The Child Support Statement is mandatory in New York State (General Obligations Law) regardless of whether or not you have children or any support obligation.

### **Any person who is four months or more in arrears in child support may be subject to having his or her business, professional and driver's licenses suspended.**

The intentional submission of a false written statement for the purpose of frustration or defeating the lawful enforcement of support obligations is punishable under §175.35 of the Penal Law. It is a Class E felony to offer a false instrument for filing with a state or local government with the intent to defraud.

### **PRIVACY NOTIFICATION**

### **Do I need to provide my Social Security number on the Application?**

Yes. The State Athletic Commission is required to collect the Social Security numbers of all licensees. The authority to request and maintain such personal information is found in §5 of the Tax Law and §3-503 of the General Obligations Law. Disclosure by you is mandatory. The information is collected to enable the Department of Taxation and Finance to identify individuals, businesses and others who have been delinquent in filing tax returns or may have underestimated their tax liabilities and to generally identify persons affected by the taxes administered by the Commissioner of Taxation and Finance. It will be used for tax administration purposes and any other purpose authorized by the Tax Law and may also be used by child support enforcement agencies or their authorized representatives of this or other states established pursuant to Title IV-D of the Social Security Act, to establish, modify or enforce an order of support, but will not be available to the public. A written explanation is required where no number is provided. The authority to request this information is also provided by 19 NYCRR §207.5(a)(1). This information will be maintained in the Licensing Information System by the Commission, at 123 William Street, New York, NY 10038-3804.

**PLEASE TAKE NOTICE THAT SUBMITTING THIS APPLICATION DOES NOT GUARANTEE YOU WILL BE AUTHORIZED TO ENGAGE IN A PROFESSIONAL COMBATIVE SPORT.**



**Application for Professional Combative Sport Second/Trainer or Matchmaker License**

*Read the Instructions before completing this application. You must print responses in ink. An \* requires a response.*

To apply for more than one license, submit a separate application, fee and required documentation for each license.

Select License Type (Check one only):  Boxing Second/Trainer (\$10.00)  Boxing Matchmaker (\$50.00)  
 Mixed Martial Arts Second/Trainer (\$40.00)  Mixed Martial Arts Matchmaker (\$100.00)

Are you currently scheduled to corner for a combatant on a specific card in New York State?  Yes  No

If "Yes", provide Date: \_\_\_\_\_ Venue: \_\_\_\_\_ Name of Combatant: \_\_\_\_\_

\*Are you applying for a new license, a license renewal or do you wish to amend/change information on your file?

(Check one only):  New (See fee above)  Renew License: DOS-PRO- \_\_\_\_\_ (See fee above)  Amendment (No fee)

**APPLICANT INFORMATION**

*First Name		*Last Name		Middle Initial	Suffix
*Address 1			Address 2		
*City		*US State or Canadian Province		*Zip/Postal Code	
County (if NYS resident)	* Country		* Gender <input type="checkbox"/> Male <input type="checkbox"/> Female		* Date of Birth (mm/dd/yyyy)
*Do you have a Social Security Number (SSN)? <input type="checkbox"/> Yes <input type="checkbox"/> No If "YES", provide your social security number: _____					
*Telephone Number - Home	Business	Cell	*Email Address		

\*  I have attached a copy of an unexpired government issued photo ID.

**BACKGROUND INFORMATION**

1) \*Do you currently hold, or have you ever held, a license issued by the NYS Athletic Commission or any other Athletic Commission?

Yes  No If "YES", provide the following information for each license held:

License type	State of issuance (USA only)	Country of issuance	License number	License year

2) \*Has any license or permit issued to you or a company in which you are or were a principal in New York or elsewhere ever been revoked, suspended or denied or have you been otherwise subject to disciplinary action?

Yes  No If "YES", explain:

3) \*Have you ever been convicted in New York or elsewhere of any criminal offense that is a misdemeanor or felony?

Yes  No If "YES", provide the following information for each conviction:

Year of conviction	Jurisdiction where conviction occurred	Offense (crime) for which you were convicted

*If convicted, attach a copy of Certificate of Relief from Disabilities, Executive Pardon or Certificate of Good Conduct or other supporting documentation.*

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4) \*Are there any criminal charges (misdemeanor or felony) pending against you in any court in New York or elsewhere?

Yes  No If "YES", provide the following information for each charge:

Year of charge	Jurisdiction where charge occurred	Offense (nature of charge)	Current status of charge

5) \*Do you have any gambling related debts?

Yes  No If "YES", explain:

## EXPERIENCE

1) \*Describe your experience and qualifications for the license you are applying. If additional space is required, attach additional documentation.

2) \* Submit a copy of your combative sport resume and list of references. Include each references' daytime telephone number and email address.

## AFFIRMATION STATEMENTS

1) \*Child Support Statement:

I certify that as of the date of this application, I am not under an obligation to pay child support or if I am under an obligation to pay child support, I am not four or more months in arrears in the payment of child support, or I am making payments by income execution or by court agreed payment or repayment plan or by plan agreed to by the parties, or my child support obligation is the subject of a pending court proceeding, or I am receiving public assistance or supplemental security income.

I have read and understand the Child Support Statement and hereby certify that I am in compliance.

2) \*Laws, Rules and Policies (find online at [www.dos.ny.gov/athletic](http://www.dos.ny.gov/athletic)):

I understand, agree and acknowledge that I am responsible for complying with the laws, rules and policies of the State of New York and the New York State Athletic Commission (NYSAC) as applicable to my license discipline.

3) \*Application Affirmation:

I, the undersigned, hereby make application in accordance with the laws of the State of New York and subject to the Rules and Regulations of the New York State Athletic Commission. I understand that this application may be approved or denied by the New York State Department of State, State Athletic Commission upon review, and that the submission of this application does not convey any rights or privileges to undertake activities for which a license is required. I affirm under the penalties of perjury the truth of the information contained herein. I understand and agree that any filing of false information made herein may subject me to criminal and administrative penalties. I further understand and agree that I will immediately amend this license application and file the amended application with the New York State Department of State, State Athletic Commission in the event that any of the information entered herein has changed. I understand that any license issued pursuant to this application is not transferable.

\_\_\_\_\_  
Applicant Print Name

X

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

## Attach the following documentation to your application:

- Copy of an unexpired government issued photo ID – NOT REQUIRED FOR RENEWAL
- Combative sport resume and list of references with their contact information – NOT REQUIRED FOR RENEWAL
- Additional explanation or documentation proving your experience or qualifications for licensure – NOT REQUIRED FOR RENEWAL
- Documentation supporting your "YES" response(s) to the questions in the "Background Information" section of this application
- \$10.00 Boxing Second/Trainer License application fee (paid by check or money order)
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