



**FIDE Chess in Schools Commission (CiS)**  
**FIDE School Instructor Title (SI)**  
**SI Seminar Application Form**  
**by Organization not a FIDE Member Fed.**

|  |      |
|--|------|
| <b>Applicant organization</b>          |      |
| e-mail address                         |      |
| mailing address                        |      |
| Official (& position)                  |      |
| <b>Endorsing National Federation</b>   | (n1) |
| Authorized Official (name)             |      |
| Authorized Official (signature)        |      |
| Authorized Official (position)         |      |
| <b>Endorsing continental President</b> | (n2) |

(n1). It is essential that the National Federation be aware of the event and either 'approve' or, at least, not disapprove. Attach their confirmatory email.

(n2). Attach confirmatory email of Continental President.

**The Applicant accepts:**

1. To conduct the seminar in accordance with *FIDE-CiS Regulations – School Instructor Title* which Applicant acknowledges having received and accepted.
2. To pay to FIDE *in advance* the FIDE Seminar fee for each seminar participant.
3. To pay all costs directly relating to the seminar - venue, lecturer fees and ancillary costs as agreed between the Applicant, the lecturer(s) and others.
4. To pay the title award fees for successful participants, or to provide written confirmation from an authorized official of the Endorsing National Federation that it will do so.

|                                     |  |
|-------------------------------------|--|
| <b>Seminar Details</b>              |  |
| Country                             |  |
| City/Town                           |  |
| Street address of seminar location  |  |
| Dates<br>(YYYY.MMdd - YYYY.MMdd)    |  |
| Daily schedule                      |  |
| Number of participants              |  |
| Seminar fee charged to participants |  |
| Proposed Lecturer                   |  |
| Assistant(s)                        |  |



|                              |  |
|------------------------------|--|
| <b>Applicant's signature</b> |  |
| <b>Name</b>                  |  |
| <b>Date (YYYY.MMdd)</b>      |  |
| <b>Stamp</b>                 |  |

Please return the application (scanned JPG or PDF) to: [si@fide.com](mailto:si@fide.com) with copies to [cis.secretary@fide.com](mailto:cis.secretary@fide.com) & [cis.chairman@fide.com](mailto:cis.chairman@fide.com)

