U.S. Paralympics Nordic Skiing
GAMES STAFF SELECTION PROCEDURES
Beijing 2022 Paralympic Games
July 28, 2020

These procedures provide for selection of U.S. Paralympics Nordic Skiing’s Games Staff [Team Leader, Coach(es), and/or (# of) Additional Officials] for the 2022 Paralympic Winter Games in Beijing, China. However, accreditation allocation is not guaranteed and will be based on final USOPC credential allocation and overall team size. Responsibility of payment for allocated accreditations will be determined by the USOPC and U.S. Paralympics Nordic Skiing.

1. Describe the specific Games Staff position(s) that U.S. Paralympics Nordic Skiing is requesting.

<table>
<thead>
<tr>
<th>USOPC Role Name - (Games Function)</th>
<th>Responsibility</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant Team Leader (up to 1)</td>
<td>Assist with all Team administration, paperwork, forms, and entries; assist the Team Leader with logistics and Games requirements.</td>
</tr>
<tr>
<td>Medical (ATC, Physio, Physician, Massage Therapist) (up to 3)</td>
<td>Provide appropriate medical care to the athletes.</td>
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</tbody>
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2. What are the U.S. Paralympics Nordic Skiing’s criteria for the above Games Staff position(s) (attach a job description, if any)?

U.S. Paralympics Nordic Skiing’s Games Staff must:

2.1. Successfully pass the National Center for Safety Initiatives’ (NCSI) background screen in accordance with the current USOPC Games Background Check Policy prior to nomination.
   2.1.1. Should a nominee experience any event between the time the background check is conducted and the relevant Games that may change his/her background check status, the nominee must inform U.S. Paralympics Nordic Skiing and/or USOPC.
2.2. Possess a valid passport that does not expire until at least six months after the conclusion of the Games.
2.3. Have the ability to work effectively with the USOPC.
2.4. Be responsible for Team’s adherence to all rules regarding discipline at the Games.
2.5. Be available for entire duration of the Games.
2.6. Demonstrate ability to establish harmonious relationships with athletes and other Team personnel.
2.7. Be in good health and able to withstand the physical rigors of traveling with and working with the Team.
2.8. Be listed on U.S. Paralympics Nordic Skiing’s Long List and must have successfully completed all Games Registration requirements by stated deadline.
2.9. Participate in USADA training as required for position.
2.10. Successfully complete the US Center for SafeSport awareness training and education program.
2.11. Have participated in a U.S. Paralympics Nordic Skiing World Cup or other International competition with the team within 15 months of the Games.

In addition to 2.1 through 2.11 above, Medical Personnel must:

2.12. Possess the appropriate certifications.
2.13. Pass a medical credential review in addition to the approved USOPC Games Background Check, which will be a combined check managed through USOPC Sports Medicine (separately arranged background checks will not be considered).
2.15. Be approved for nomination through the USOPC’s Sports Medicine Division.

In addition to 2.1 through 2.11 above, Assistant Team Leader Must:

2.16. Fulfill all duties and requirements of the USOPC including attendance at USOPC Games related meetings.
2.17. Have strong administrative, communication and organizational capabilities/skills.
2.18. Have U.S. Paralympics Nordic Skiing’s approval to make financial decisions regarding the Team.
2.19. Have previous administrative, international relations and/or Team Leader experience at an international competition.
2.20. Have previous experience at a major international Nordic Skiing championship.
2.21. Have a thorough knowledge and understanding of:
   2.21.1. Nordic sport terminology;
   2.21.2. U.S. Paralympics Nordic Skiing Athlete and Sport Program Plan;
   2.21.3. Athlete selection procedures for the assigned team; and
   2.21.4. USADA and IPC Anti-Doping policies and procedures.
2.22. Have ability to positively interact with coaching staff, athletes, U.S. Paralympics and USOPC Administration, and World Para Nordic Skiing personnel.

3. Describe the process that candidates shall follow to express interest in being considered for a Games Staff position, in each category below:
The positions will not be posted. The positions will be filled by those currently serving in these roles with the U.S. Paralympics Nordic Skiing Team, who express interest when contacted or those who
have served in these roles at past World Cups, World Championships and Paralympic Games with the U.S. Paralympics Nordic Skiing Team and/or U.S. Ski Team or US Biathlon Team, and who best meet the criteria as outlined in Section 2 as determined by the committee outlined in Section 7.

4. Describe the intended method of identifying the pool and selecting the candidates to be considered for the Games Staff position(s) listed below:

   Team Leader: See Section 3 above.

   Medical: See Section 3 above.

5. Describe the removal of Games Staff:

   An individual who is to be nominated to the above-listed Games Staff position(s) by the U.S. Paralympics Nordic Skiing may be removed as a nominee for any of the following reasons, as determined by the U.S. Paralympics Nordic Skiing.

   5.1 Voluntary withdrawal. Games Staff nominee must submit a written letter to Chief of Paralympic Sport.

   5.2 Injury or illness as certified by a physician (or medical staff) approved by U.S. Paralympics Nordic Skiing. If the individual refuses verification of his/her illness or injury by a physician (or medical staff) approved by the U.S. Paralympics Nordic Skiing, his/her injury will be assumed to be disabling and he/she may be removed.

   5.3 Inability to perform the duties required.

   5.4 Violation of the U.S. Paralympics Code of Conduct (Attachment B).

Once the Games Staff nomination(s) is accepted by the USOPC, the USOPC has jurisdiction over the Games Staff, at which time, in addition to any applicable U.S. Paralympics Code of Conduct, the USOPC’s Games Forms apply. The USOPC’s Games Forms are available as part of Games Registration prior to the respective Games.

6. Describe the replacement of Games Staff:

   In the event that the Nominated Games Staff member is unable to perform the duties of the position(s) for injury, illness, Code of Conduct violation or any other unforeseen circumstances that would result in the need to replace him/her, the replacement candidate must meet all of the applicable criteria listed in #2 above and be selected through the same process as outlined in Sections 3 and 4.

7. Which group/committee will make the final approval of the Games Staff position(s)?
The Chief of Paralympic Sport, Director U.S. Paralympics Nordic Skiing and Athlete Representative for U.S. Paralympics Nordic Skiing will make the final approval.

8 Conflict of Interest:

An individual involved in the selection process who has a conflict of interest must disclose this information, and recuse him or herself and not influence others regarding the discussions, meetings or decisions involving the selection of the Games Staff position(s). If there is an issue concerning whether a conflict of interest exists, the USOPC’s Board or Ethics Committee, as appropriate, shall determine if a conflict exists.

9 Date of Nomination:

The Games Staff Nomination Form with the Staff nominee’s name, including the name of a replacement (if applicable), will be submitted to the USOPC on or before:

Medical Staff: TBD
All other Staff: January 4th, 2022

10 Publicity/Distribution of Procedures:

The USOPC approved selection procedures (complete and unaltered) will be posted/published by the U.S. Paralympics Nordic Skiing in the following locations:

10.1 Web site: http://www.usparalympics.org
These procedures will be posted as soon as possible, but not more than five days following notice of approval by the USOPC.

10.2 Other (if any):

<table>
<thead>
<tr>
<th>Position</th>
<th>Print Name</th>
<th>Signature</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>NGB/HPMO/PSO President or CEO/Executive Director</td>
<td>Julie Dussliere</td>
<td></td>
<td>7/28/20</td>
</tr>
<tr>
<td>USOPC Athletes’ Advisory Council Representative*</td>
<td>Sean Halsted</td>
<td></td>
<td>7/28/20</td>
</tr>
</tbody>
</table>

* If the USOPC AAC Representative has delegated authority to the Alternate AAC Representative to sign the Selection Procedures, attach a letter from the AAC Representative indicating the reason he/she has delegated authority.
Signature by the Athlete Representative constitutes that he/she has read and understands the Selection Procedures. If the Athlete Representative reads and does not agree with the Selection Procedures being submitted by the NGB/HPMO/PSO, he/she may submit those reasons in writing to his/her Sport Performance Team.

If, for some reason, a sport does not have an elected USOPC AAC Representative, the NGB/HPMO/PSO must designate an athlete from that sport to review and sign the Selection Procedures.
Attachment A

USOPC Sports Medical Games Requirements

PURPOSE

The USOPC has developed medical requirements to ensure the safety of athletes during Games (Olympic, Paralympic, Pan American and Para Pan American, etc.). This policy addresses equipment requests and minimum standards for all NGBs/HPMOs/PSOs (NGBs from here forward) and medical providers attending games.

POLICY

1. Requests

NGBs must identify medical support requests to the USOPC Sports Medicine department. These requests must specify any supplies, equipment, and other medical support provided at the Games. Anti-doping concerns or comments should also be identified. Collected information will be reviewed by the USOPC Managing Director of sports medicine who will then identify and communicate the level of support to be provided by USOPC Sports Medicine. Any changes to the requested sports medicine support should be immediately forwarded to USOPC Sports Medicine. In cases where medical services or materials are not identified, the USOPC cannot guarantee support for additional or late requests because of time, budget and other factors.

2. NGB Health Care Providers

NGBs must nominate and allocate Games credentials to NGB identified health care provider(s) to support the NGB sports medicine needs during the games. Any potential NGB medical provider who could be nominated to provide services must be identified by the NGB no later than the due date for the respective Games Long List. Additionally, all NGB medical providers must meet the criteria as identified in the NGB’s approved Additional Officials Selection Procedures, along with the additional criteria outlined below.

The medical staffing list will include anyone who will potentially be credentialed by the NGB and/or use a day pass to provide services at an Olympic/Paralympic Village or a High Performance Training Center. Health care providers must meet minimum qualification standards which are identified below by their specialty without exception. NGBs must ensure their identified medical staff can meet these standards prior to advancing their nomination for a Games credential or day pass access. If the provider is not licensed in the United States, they may be ineligible to be credentialed. In order to meet expected standards of care and mitigate risk management issues, selected provider(s) must meet the below minimum qualifications in addition to the Selection Procedures criteria to provide medical services at games. These qualifications include:
1) Meet all criteria identified in the USOPC Volunteer Program Application for specific specialty (Attachments located at www.teamusa.org/medicalvolunteer). On occasion, specific supporting documentation will be requested at the discretion of USOPC Sports Medicine.

2) Successfully pass a medical credential review and criminal background check at or above USOPC standards with the National Center for Safety Initiatives (NCSI).

3) Review of the venue emergency action plan with USOPC Sports Medicine staff prior to the first scheduled practice or event.

4) Complete required Medical Team Education Modules addressing Anti-Doping, Safe Sport and/or other prerequisite training.

Appendix: Location of criteria:
- Athletic Trainer Qualification Criteria – located at www.teamusa.org/medicalvolunteer
- Physical Therapist Qualification Criteria - located at www.teamusa.org/medicalvolunteer
- Doctor of Chiropractic Qualification Criteria - located at www.teamusa.org/medicalvolunteer
- Physician Qualification Criteria - located at www.teamusa.org/medicalvolunteer
- Massage Therapist Qualification Criteria - located at www.teamusa.org/medicalvolunteer
PLEDGE AND AGREEMENT

I pledge to uphold the spirit of this Code of Conduct (the “Code”), which offers a guide to my conduct as a member of a U.S. Paralympics National Team or a U.S. Paralympics Team to international competition (the “Team”). This Code applies to those Paralympic sports in which the United States Olympic & Paralympic Committee (USOPC) has not recognized a National Governing Body or a Paralympic Sport Organization to govern the sport. I acknowledge that I have a right to a hearing if my opportunity to compete is denied or if I am charged with a violation of this Code.

I have familiarized myself with the Code and understand that acceptance of its provisions is a condition of my membership on the Team.

As a Member of the Team, I hereby promise and agree that I:

• will abide by all published rules related to the Team selection procedures as approved by U.S. Paralympics or the USOPC;

• have acted and will act in a sportsmanlike manner consistent with the spirit of fair play and responsible conduct;

• will maintain a level of fitness and competitive readiness that will permit my performance to be at the maximum of my abilities;

• will notify U.S. Paralympics if (i) I have a physical injury or illness that might compromise my ability to compete; (ii) will submit, if requested, to a physical/medical examination by medical personnel approved by the USOPC and authorize the submission of the physical examination/medical information to US Paralympics and the USOPC; and (iii) understand that such injury or illness may be the cause for my not being selected to the Team, being removed from the Team, or not being allowed to participate if I remain on the team.

• will comply with all aspects of the U.S. Center for SafeSport’s (the “Center”) SafeSport Code for the U.S. Olympic and Paralympics Movements (the “SafeSport Code”) and all other applicable athlete safety policies, procedures and protocols of the USOPC and the Center. Such policies include the USOPC Athlete Safety Policy and the Minor Athlete Abuse Prevention Policies;
• will not commit a doping violation as defined by the World Anti-Doping Agency (WADA), the United States Anti-Doping Agency (USADA), the International Paralympic Committee (IPC) or USOPC rules;

• am not currently provisionally suspended or serving a period of ineligibility for a doping violation and/or do not have a pending or unresolved doping charge;

• will immediately notify the USOPC at athlete.safety@usoc.org if I have any (a) unresolved allegations of SafeSport Code violations, (b) participation restriction, safety plan(s), temporary measure(s) and/or sanction(s);

• will not engage in any conduct that is criminal under any laws applicable to me, including, but not limited to laws governing the possession and use of drugs and alcohol and providing of drugs to any person and of alcohol to minors; and I have the affirmative duty to disclose my criminal history to the USOPC. Failing to disclose, or intentionally misrepresenting, an arrest, plea, or conviction is grounds for disciplinary action regardless of when the offense is discovered or occurred;

• will not participate or assist in any gambling or betting activities associated with any event related to my sport or my participation;

• am eligible to compete under the rules of the IPC and its pertinent committees, and its pertinent member organizations and under the rules of the USOPC;

• am in possession of a valid U.S. passport, that will not expire prior to six months following the conclusion of any international competition, should I be chosen for an international team that requires a passport;

• will refrain from conduct detracting from my ability or that of my teammates to attain peak performance;

• will respect the property of others whether personal or public;

• will maintain a level of personal hygiene and cleanliness appropriate to respect my teammates;

• will respect members of my Team, other teams, spectators and officials, and engage in no form of discriminatory behavior nor in any form of verbal, physical or sexual harassment or abuse;

• will follow the Team rules, whether set by Team leadership or adopted by consensus, including by way of example, rules regarding curfew and required attendance at Team meetings;

• agree to wear the uniforms approved by U.S. Paralympics at official activities sponsored by the USOPC or U.S. Paralympics as directed by U.S. Paralympics staff, and I agree to compete in the U.S. Paralympics-approved Team uniform, where such a uniform is provided, in competitions at which I am supported by U.S. Paralympics. I agree to wear the names and logos of U.S. Paralympics sponsors, suppliers and licensees on Team competition wear, other
uniforms and casual wear as provided by U.S. Paralympics. I agree to not alter any Team uniform, either by removing or obstructing the names or logos of U.S. Paralympics sponsors, suppliers and licensees or by adding patches, stickers, or other means of displaying unauthorized names, logos or messages;

• agree to not demean or defame the USOPC, U.S. Paralympics or its sponsors, their names, logos, marks, products or services. I acknowledge that endorsing and supporting U.S. Paralympics sponsors through my actions and words reflects well on the team and on those supporting the team.

• agree to be filmed, videotaped and photographed, and to have my image and voice otherwise recorded, in any media, during any event I am attending under the auspices of the USOPC or U.S. Paralympics, by U.S. Paralympics official photographer(s), film crew(s) and video crew(s), and by any other entity authorized by U.S. Paralympics, under the conditions specified by U.S. Paralympics. I hereby grant U.S. Paralympics the irrevocable, perpetual, fully paid-up, worldwide right and license to use, and to authorize third parties to use, in all media, my name, picture, likeness, voice and biographical information for: (1) news and information purposes, (2) promotion of the Paralympic movement and the specific competition(s) in which I compete, (3) promotion of the Team, and (4) promotion of U.S. Paralympics and the USOPC ; in no event may U.S. Paralympics or the USOPC use or authorize the use of my name, picture, likeness, voice and biographical information for the purpose of trade, including any use in a manner that would imply an endorsement of any company, product, or service, without my written permission;

• will not use or authorize the use of photographs, films or videos of myself in my USOPC or Paralympic Team apparel or equipment or the use of any USOPC or U.S. Paralympics logo for the purpose of trade, promotion, fundraising or on merchandise, without the prior written consent of U.S. Paralympics;

• will abide by the rules of the IPC or other Paralympic international federation concerning allowable trademark identification on clothing and equipment worn or used in competition or on my body (such as visible tattoos).

• will be responsible for payment of all legal fees and expenses if I require legal representation because I am accused of a doping violation or criminal misconduct, or if for any other reason I require the services of an attorney;

• will act in a way that will bring respect and honor to myself, my teammates, the Team, U.S. Paralympics, the USOPC, and the United States; and

• will remember that at all times I am an ambassador for my sport, my country and the Paralympic Movement.
ATHLETE OMBUDSMAN

I may contact the USOPC Athlete Ombudsman, at 719.866.5000 or ombudsman@usathlete.org for further information regarding my rights under this Code that are not answered by U.S. Paralympics.

PARTICIPANT AFFIRMATION

I have read and accept this Code of Conduct. I agree to the rules, guidelines, jurisdiction and procedures stated in these documents as a condition of being a member of the Team.

__________________________  _________________________
Signature                  Date

__________________________
Name (Print)

PARENT/GUARDIAN CERTIFICATION
(For Participants Under the Age of 18 as of Date of Signature)

I certify that I, as parent/guardian with legal responsibility for this participant, have read and accept this Code of Conduct and, on behalf of my minor participant, agree to the rules, guidelines, jurisdiction and procedures stated in these documents as a condition of being a member of the Team.

__________________________  _________________________
Signature                  Date

__________________________
Name (Print)

__________________________
Relationship (Parent or Guardian)