

**CERTIFIED SPORTS FIELD MANAGER  
CODE OF PROFESSIONAL PRACTICE**

The SFMA may revoke or otherwise take action with regard to the application or certification of an individual in the case of:

- i. Ineligibility for certification;
- ii. Irregularity in connection with any certification examination;
- iii. Unauthorized possession, use, access, or distribution of certification examinations, score-reports, answer sheets, certificates, certificant or applicant files, documents or other materials;
- iv. Material misrepresentation or fraud in any statement to the Certification Committee or to the public, including but not limited to statements made to assist the applicant, certificant, or another apply for, obtain, or retain certification;
- v. Gross or repeated negligence in professional work and/or behavior which includes negligence in fulfilling entrusted and/or required responsibilities in providing and maintaining the safety, playability, aesthetics and appeal of athletic fields under the Sports Field Manager's supervision; unfair treatment and/or abuse of staff members under his/her supervision; discourteous treatment of supervisors, coaches, athletes and/or attendees at athletic activities; and any abusive or non-abusive behavior unbecoming of a professional;
- vi. The conviction of, plea of guilty to, or plea of nolo contendere to a felony or misdemeanor which is directly related to public health, athletic care or education. This includes but is not limited to rape, sexual abuse of a child or athlete, actual or threatened use of a weapon of violence; the prohibited sale or distribution of a controlled substance, or its possession with the intent to distribute; or use of the position of Sports Field Manager improperly to influence the outcome or score of any athletic contest or event or in connection with any gambling activity; and
- vii. Not adhering to the eligibility requirements for certification candidacy or obtaining and properly submitting the established CEU and/or ISP requirements for recertification.

I hereby note and attest the SFMA may revoke or otherwise take action with regard to my application for certification or my status as a Certified Sports Field Manager according to the stipulations outlined in the above Code of Professional Practice.

Date of Certification Application: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

PLEASE SUBMIT THIS SIGNED FORM WITH YOUR APPLICATION FOR CERTIFICATION