



**BASKETBALL OFFICIAL'S PROFILE SHEET
CIF NORCAL REGIONAL & STATE BASKETBALL CHAMPIONSHIPS**

This form must be signed and returned to your Association Assignor IMMEDIATELY. Please ensure that the form is legible.

You have been nominated for possible assignment to CIF Regional/State basketball championship games.

The 2009 CIF championship schedule is as follows:

2009 NORCAL REGIONAL GAMES - March 9, 10, 12, 14, 2009
2009 STATE CHAMPIONSHIPS - March 20 & 21, 2009

NOMINATED FOR BOYS GAMES: _____ GIRLS GAMES: _____ BOTH: _____

PLEASE NOTE: NOMINATED OFFICIALS ARE NOT GUARANTEED AN ASSIGNMENT TO A CIF REGIONAL OR STATE CHAMPIONSHIP GAME.

ASSOCIATION _____ CIF SECTION _____

NAME _____ ADDRESS _____

CITY _____ ZIP _____ WORK PHONE _____

HOME PHONE _____ CELL PHONE _____ EMAIL _____

PRINT LEGIBLY

1. YEARS OF EXPERIENCE:

BOYS/MENS GAMES: HIGH SCHOOL VARSITY _____ JUNIOR COLLEGE _____ COLLEGE _____
GIRLS/WOMENS GAMES: HIGH SCHOOL VARSITY _____ JUNIOR COLLEGE _____ COLLEGE _____

2. PREVIOUS SECTION PLAYOFF EXPERIENCE, (BOYS & GIRLS GAMES), LAST FIVE YEARS, MOST RECENT FIRST

YEAR	ROUNDS	DIVISION	TEAMS

3. WHAT LEVELS HAVE YOU BEEN ASSIGNED THIS SEASON AND HOW MANY GAMES?

HIGH SCHOOL – BOYS _____ GIRLS _____ JUNIOR COLLEGE – MEN _____ WOMEN _____
4 YEAR COLLEGE – MEN _____ WOMEN _____ DIVISION I _____ / _____ DIVISION II _____ / _____ DIVISION III _____ / _____

4. IF A MEMBER OF ANOTHER HIGH SCHOOL ASSOCIATION(S), PLEASE LIST _____

5. ARE YOU (OR A MEMBER OF YOUR IMMEDIATE FAMILY) EMPLOYED AT A CALIFORNIA HIGH SCHOOL OR DID YOU (OR MEMBERS OF YOUR IMMEDIATE FAMILY) ATTEND OR GRADUATE FROM A CALIFORNIA HIGH SCHOOL(S)?
YES ___ NO ___ IF YES, NAME OF SCHOOL(S) _____

6. DATE OF MOST RECENT FORMAL TRAINING IN 3-PERSON MECHANICS WHEN _____ BY WHOM _____

7. DURING THE 2008-09 SEASON I HAVE BEEN OR WILL BE ASSIGNED THE FOLLOWING # OF GAMES AS A MEMBER OF A 3-PERSON CREW?

HIGH SCHOOL: GAMES B _____ G _____ JUNIOR COLLEGE: GAMES M _____ W _____ 4 YEAR COLLEGE: GAMES M _____ W _____

I UNDERSTAND THAT I AM AN INDEPENDENT CONTRACTOR AND NOT AN EMPLOYEE OF THE CIF OR ITS MEMBER SECTIONS, LEAGUES OR SCHOOLS. (THIS FORM MUST BE SIGNED BY THE NOMINATED OFFICIAL.)

Signature

Date