



CIF Wrestling Championship Official's Nomination Form

Association Directors:

1. Please forward this template to qualified and recommended official in your association.
2. Have the official fill this out electronically and return to you electronically.
3. Association Director will forward this application and picture to their section commissioner.
4. The Section Commissioner will sign electronically and forward to Monty Muller mullermonty@comcast.net & Duane Morgan dmorgan@cifccs.org

2 x 2 photo-jpeg format
gray official shirt

Must be sent in jpeg format

Send as an attached file along with
this application

This is a locked template-please type in the blanks

Due Date: December 4, 2009

Official's Name: _____

E-mail Address: _____

Address: _____

City: _____

Zip: _____

Home Phone: _____

Cell Phone: _____

Which CIF Section are you representing: _____

Wrestling Experience (Competitor/Coach) _____

Officiating Experience (year, level, major tournaments) _____

References (with contact information): _____

Officials Association Director Information:

Name: _____

E-mail: _____

Home Phone: _____

Cell Phone: _____

Section Commissioner Signature (required-electronically if possible): _____ Date: _____