

I.A.A.B.O.
INTERNATIONAL ASSOCIATION OF APPROVED BASKETBALL OFFICIALS
EASTERN BOARD #8

Web Site: www.iaabo8.org

APPLICATION FOR MEMBERSHIP

I hereby acknowledge that I am 18 years of age and submit this application for membership to the International Association of Approved Basketball Officials and Eastern Connecticut Board #8 of Approved Basketball Officials, Inc.

I request the opportunity to take the written rules examination. It is my understanding that if I pass the written examination with a grade of 80% or higher, I will then be eligible to pass a floor examination/training classes. The application fee of \$155.00 is payable in full prior to the first class with this application & includes class fees, test fees, 1st year dues, rules book, testing material, handouts and administrative fees. (\$75.00 refund for failure to pass the written exam.) Completion of the training classes/floor exam DOES NOT guarantee acceptance as a candidate member to IAABO #8. Acceptance is also determined by the need for new officials. If not accepted as a candidate member, no refund of the application fee will be provided. Please submit addendum page and background check page with this page.

NAME: _____ DATE OF BIRTH: _____
RESIDENCE: _____ CITY/STATE/ZIP: _____
SSN: ____ - ____ - ____ CELL: _____ HOME PHONE: _____ WORK PHONE: _____

EMPLOYER: _____ ADDRESS: _____

EMAIL ADDRESS: _____

EXPERIENCE IN YEARS AS: PLAYER: _____ COACH: _____ OFFICIAL: _____

REFERENCES: List two individuals who are familiar with your background in basketball.

Please sign this application and enclose the fee of \$155.00. Make checks payable to:

Eastern Board #8

Direct all inquiries to:

Mike Thomas, Interpreter/Training Director, 62 Aspinook Street, Jewett City, CT 06351 or
by email at interpreter@iaabo8.org Phone: 860-912-6736

How did you find out about IAABO Board #8? _____

APPLICANT SIGNATURE: _____ DATE: _____

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APPLICATION FOR MEMBERSHIP – ADDENDUM

I hereby affirm that the supplemental information I am providing below is true, complete and accurate. I acknowledge that the Eastern CT Board #8 of Approved Basketball Officials, Inc. will reply on this information to make a determination concerning my application for membership. I also acknowledge that the failure to provide true, complete and accurate information shall be grounds to deny membership. Should the discovery of a failure to provide true, complete and accurate information occur following the admission of membership of the applicant, this failure shall be cause for such membership to be terminated immediately.

By signing below, I acknowledge understanding and agreeing to the same.

NAME: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE? YES ___ NO ___ IF YES, FOR EACH CONVICTION, PLEASE PROVIDE DATE OF CONVICTION, COURT LOCATION AND OFFENSE FOR WHICH YOU WERE CONVICTED:

HAVE YOU EVER BEEN CONVICTED OF A MAJOR MOTOR VEHICLE OFFENSE, SUCH AS DRUNK DRIVING, MANSLAUGHTER WITH A MOTOR VEHICLE OR ASSAULT WITH A MOTOR VEHICLE? YES ___ NO ___ IF YES, FOR EACH CONVICTION, PLEASE PROVIDE DATE OF CONVICTION, COURT LOCATION, AND OFFENSE FOR WHICH YOU WERE CONVICTED _____

HAVE YOU EVER BEEN A MEMBER OF AN IAABO BOARD IN THE PAST? YES ___ NO ___ IF YES, PLEASE STATE WHICH BOARD AND THE YEARS SERVED AS A MEMBER: _____

IF YES (ABOVE), WAS YOUR IAABO MEMBERSHIP EVER PLACED ON PROBATION, SUSPENDED OR OTHERWISE TERMINATED: YES ___ NO ___ IF YES, PLEASE EXPLAIN BELOW

HAVE YOU EVER BEEN A MEMBER OF ANY OTHER OFFICIATING ORGANIZATIONS, FOR ANY SPORT? YES ___ NO ___ IF YES, PLEASE STATE WHICH ORGANIZATION AND YEARS OF MEMBERSHIP: _____

IF YES, WAS YOUR MEMBERSHIP EVER PLACED ON PROBATION, SUSPENDED, OR OTHERWISE TERMINATED: YES ___ NO ___; IF YES, PLEASE PROVIDE DETAILS OF THE SAME: _____

HAVE YOU EVER BEEN A COACH, VOLUNTEER OR HIRED FOR ANY SPORT? YES ___ NO ___ IF YES, PLEASE STATE WHERE YOU COACHED, VOLUNTEERED OR WORKED _____

IF YES, WERE YOU EVER PLACED ON PROBATION, SUSPENDED OR OTHERWISE TERMINATED: YES ___ NO ___ IF YES, PLEASE PROVIDE DETAILS OF THE SAME _____

APPLICANT SIGNATURE: _____ DATE: _____