



**Wisconsin Intercollegiate Athletic Conference**

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**Registration for Prospective Men's Basketball Officials**

Name: \_\_\_\_\_  
*Last Name First Name Middle Initial*

Address: \_\_\_\_\_  
*Home Address City State Zip*

\_\_\_\_\_ *Business Address City State Zip*

Telephone: \_\_\_\_\_  
*Home Business Cell*

E-Mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

College Attd: \_\_\_\_\_ Year of Graduation: \_\_\_\_\_

<b>Basketball Officiating Background</b>					
<i>High School</i>			<i>College</i>		
Conferences	#Years Officiating	#Assignments/Year	Conferences	# Years Officiating	#Assignments/Year

*Please attach your officiating schedule for the past two years.*

Have you worked in a 3-person crew? \_\_\_\_\_ Yes \_\_\_\_\_ No

Have you attended any collegiate officiating camps with an emphasis on 3-person mechanics?  
 \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please list camps and year of attendance

<u>Camp</u>	<u>Year</u>
_____	_____
_____	_____
_____	_____
_____	_____

Membership in Officials' Associations \_\_\_\_\_  
 or other Conference Staffs: \_\_\_\_\_  
 \_\_\_\_\_

Please **'X'** those universities to which you are willing to travel:

**Weekdays** (Monday through Friday):

<input type="checkbox"/>	Eau Claire	<input type="checkbox"/>	River Falls
<input type="checkbox"/>	La Crosse	<input type="checkbox"/>	Stevens Point
<input type="checkbox"/>	Oshkosh	<input type="checkbox"/>	Stout
<input type="checkbox"/>	Platteville	<input type="checkbox"/>	Whitewater

**Weekends** (Saturday and Sunday):

<input type="checkbox"/>	Eau Claire	<input type="checkbox"/>	River Falls
<input type="checkbox"/>	La Crosse	<input type="checkbox"/>	Stevens Point
<input type="checkbox"/>	Oshkosh	<input type="checkbox"/>	Stout
<input type="checkbox"/>	Platteville	<input type="checkbox"/>	Whitewater

**References:** List three references who can attest to your officiating ability; preferably collegiate supervisors/assignors, officials and/or coaches. Attach a sheet for any additional information that you feel may be pertinent.

1. \_\_\_\_\_  
*Name* *Affiliation* *Business Phone* *Home Phone*

Supervisor/Assignor    College Official    College Coach    Other: \_\_\_\_\_

2. \_\_\_\_\_  
*Name* *Affiliation* *Business Phone* *Home Phone*

Supervisor/Assignor    College Official    College Coach    Other: \_\_\_\_\_

3. \_\_\_\_\_  
*Name* *Affiliation* *Business Phone* *Home Phone*

Supervisor/Assignor    College Official    College Coach    Other: \_\_\_\_\_

I certify that the information I have provided is true and complete to the best of my knowledge, and I understand that inaccurate information may affect my employment.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature