

SOUTHWESTERN ATHLETIC CONFERENCE FOOTBALL OFFICIATING APPLICATION

Date of Application:				
Pleas	e print or type			
PERSONAL INFORMATION				
Name: Social Secu	cial Security Number:		Date of Birth:	
Address:	Age:	Height:	Weight:	
City, State, Zip:	Home Ph	one:		
Present Business Occupation:	Work Phor	ne:		
Address:	Cell Phone	e:		
-	E-mail:			
College(s) Attended (Years and Degree):				
College Football Playing Experience: # Years: _				
High School Football Playing Experience: # Years:				
List any present physical conditions of restrictions:				
Have you ever been convicted of a felony? Yes	No If yes, e.	xplain:		
Do you have any outstanding Judgments or Bankru	uptcies? Yes	No If yes,	explain	
Do you currently have relatives working, attending, If yes,	or affiliated with a	any SWAC Inst	itution? Yes No	
Name of relative, in what capacity:				
OFFICIATING EXPERIENCE				
Total Years of Experience: 2 or 4 Yea	r College	High School: _		
List any College Conferences and Professional Lea	agues in which yo	u have officiate	ed:	
Position(s) in which you would like to specialize:	/		/	

Shirt

Shoe Size



SOUTHWESTERN ATHLETIC CONFERENCE FOOTBALL OFFICIATING APPLICATION (cont.)

COMPLETETION OF APPLICATION

- Photograph (Color or B/W)
- Copy of your Birth Certificate

I, the undersigned, supply the information herein to the Southwestern Athletic Conference in consimy application to be a football official. In doing so, I grant my permission for any representative of SWAC to make a credit and/or character check.	
Signature	

RETURN COMPLETED APPLICATION TO:

Harold Mitchell Sr. Coordinator of Football Officials hmitchell@bellsouth.net