

Upon completion of the application, please forward to Your Board Secretary



2018 IAABO FOUNDATION COMMITTEE SCHOLARSHIP APPLICATION

Name: _____

Address: _____

City, State, & Zip: _____

Board No.: _____

IAABO Member Since: _____ (Year)

Number of Years of Officiating: ____ Varsity ____ Sub-Varsity

Name of IAABO School attending: _____
(Please fax or email copy of registration form)

Is this your first time attending an IAABO Officials' School: ____ Yes ____ No

Have you attended other IAABO Schools or non-IAABO Schools in the past? If so, please indicate below:

Please explain how your attendance at this school will enhance your officiating goals.

Does your local board reimburse members for school attendance? If yes, how much?

Please have your Board Secretary fax a letter of support for your application along with your application to Bill Varno, Foundation Trustee, at (717) 718 - 6164 or mail it to IAABO Foundation, c/o Bill Varno, 23 Rosa Road, Schenectady, NY 12308.

Member is in Good Standing ____ Yes ____ No (Verified by Board Secretary)