

# OFFICIAL'S PREFERENCE SHEET

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Mobile Phone: \_\_\_\_\_

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

Employed by: \_\_\_\_\_ City: \_\_\_\_\_

Time you can leave work: \_\_\_\_\_

Could you leave earlier if necessary? \_\_\_\_\_ What time? \_\_\_\_\_

Circle days you **CAN NOT** officiate:

Monday      Tuesday      Thursday      Friday      Saturday

List specific dates you know that you **CAN NOT** officiate:

\_\_\_\_\_

**The State Association has issued the following Conflicts of Interest Rules. Please read and indicate to the scheduler which schools we should not schedule you to work.**

- \* **If either you or your spouse are employed by any school fielding a team.**
- \* **If you are related by blood or marriage (parent, grandparent, child, grandchild, brother, sister, brother-in-law, son-in-law, etc.) to a person affiliated with a team.**
- \* **If you and any person affiliated with a team are or were team mates, roommates, classmates, business associates or close personal friends.**
- \* **If you or your spouse attended or worked at a school within the last 5 years.**
- \* **If you have a child in school or one who has graduated within the previous 2 years.**
- \* **For detailed list ... please see TASO Conflicts of Interest Policy.**

List Schools:

\_\_\_\_\_

\_\_\_\_\_

## **Return to scheduler ASAP**

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OR scan and send via e-mail to [lleberhardt@gmail.com](mailto:lleberhardt@gmail.com)

PHOTO ID CHECKED \_\_\_\_\_ BY: \_\_\_\_\_

ALREADY REGISTERED WITH TASO: \_\_\_\_\_ YES \_\_\_\_\_ NO