ILLINOIS ELEMENTARY SCHOOL ASSOCIATION

RECOMMENDATION OF OFFICIAL

Four recommendations signed by administrators and coaches must be received to be considered for sectional and/or state assignments. <u>This form will not be considered without the Administrator's signature</u>. Please make copies of this form as needed.
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I wish to recommend_____ for consideration as a sectional and/or state level official for the Illinois Elementary School Association in the following sport: _____.

Official's Address:_____

City, State, Zip: _____

Home Phone (Include Area Code): _____

Business Phone (Include Area Code): _____

Cell Phone (Include Area Code): _____

E-Mail Address:_____

Number of Years Registered in this Sport with IHSA: _____

Official's IHSA Rating (Circle one): Registered Recognized Certified

We understand that by signing this form, we are recommending the above named official be added to the IESA approved officials' list in this sport, and that he/she be given the opportunity to officiate contests in the state tournament series. This person is registered in this sport with the Illinois High School Association and officiates junior high activities in this sport during the regular season.

Signed: _____ _____
(Administrator) (Coach)

_____
School

Return Form To: IESA, 1015 Maple Hill Rd., Bloomington, IL 61705
Ph: 309-829-0114; Fax: 309-829-0625