

# Slippery Rock University

## Intramural Official's Application

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

SRU Student ID #: \_\_\_\_\_

School Address: \_\_\_\_\_ Permanent Address: \_\_\_\_\_  
 \_\_\_\_\_

School Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Emergency Contact Phone #: \_\_\_\_\_

Relation to Emergency Contact: \_\_\_\_\_

Expected Graduation Year: \_\_\_\_\_ SRU Major: \_\_\_\_\_

Are you currently employed with SRU?    Yes    No                                    If yes, where?  
 Have you worked for SRU previously?    Yes    No                                    If yes, where?

Currently C.P.R. certified?    Yes    No                                    If yes, when does it expire? \_\_\_\_\_  
 Currently First Aid certified?    Yes    No                                    If yes, when does it expire? \_\_\_\_\_

Sports in which you are interested (check all that apply):

Basketball                                     Soccer (Indoor/Outdoor)  
 Dodgeball                                         Softball  
 Flag Football                                     Ultimate Frisbee  
 Hockey (Floor/Roller)                         Volleyball

Please identify any sports that you have previous experience or are certified to officiate:

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<b>Availability</b>					
Place an "X" in the boxes that you are <b>unable</b> to work:					
Time	Sunday	Monday	Tuesday	Wednesday	Thursday
4:00					
5:00					
6:00					
7:00					
8:00					
9:00					
10:00					
11:00					

Are you available for weekends?    Yes    No

\*Some special events are dated on weekends