**OFFICIAL US LACROSSE USE ONLY**

Original Date Received:

Date Updated:

# 

# CONTRIBUTOR as an OFFICIAL

# Nominee Questionnaire

I. PERSONAL DATA

Required information noted in **BOLD**

□ Candidate is deceased. Date of passing:

**Candidate’s Full Name:**

Maiden Name: Spouse Name:

**Home Address:**

**City:** **State:** **Zip:**

**Birth Date:**

**Home Phone:** ( ) Work Phone: ( )

Cell Phone: ( ) E-mail:

Category: Official Minimum Criteria for Men and Women

1. Must be at least five years retired\* or at least twenty years as an active official/umpire
2. Must be inducted into at least one USA Lacrosse, local or affiliated, Hall of Fame. The exception noted where greatest lacrosse achievements and contributions occurred in an area where no USA Lacrosse, local or affiliated, Hall of Fame is established and active.
3. Must have demonstrated character beyond reproach \* retired = not participating at the level of play for which candidate is being evaluated for induction

Accomplishment Criteria for Men and Women

To be eligible in this category, all nominees must have achieved at least one of the following criteria:

1. Collegiate Officiating (one of the following) a. Officiate 3 Collegiate National Championships b. Officiate 6 Collegiate Semi-Final tournament games
2. International Officiating a. Officiate an international competition (Men World Championship, Women World Cup/Championship) b. 1 Collegiate National Championships or 2 Collegiate Semi-Final tournament games
3. Professional Officiating a. Officiate a Professional Championship (MLL, PLL, WPLL, AU, NLL, UWLX) b. 1 Collegiate Division I National Championships or 2 Collegiate Division I Final Four Tournament games

**Date that candidate last participated at the level of play for which candidate is being**

**evaluated for induction:**

**Candidate’s current role/involvement in the game:**

Please list occupation/position held and involvement with professional organizations.

II. OFFICIATING INFORMATION

Required information noted in **BOLD**

**Levels of officiating attained:**

**Level Year Attained Dates Participated**

**-**

**-**

**-**

**-**

**-**

**High School – Official**

**League/District Location Dates Participated**

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**College – Official**

**League/District Location Dates Participated**

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**Have you served as an official for collegiate semifinal game play?**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Have you served as an official for collegiate championship game play?**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**International – Official**

**Competition Location Dates Participated**

**Have you served as an official for international semifinal game play?**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Have you served as an official for international championship game play?**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

**Event Year Location**

Club – Official

League/District Location Dates Participated

-

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Professional – Official

League/District Location Dates Participated

-

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**Please list all honors or accolades you have received as an official.**

**Honor Year**

**Honor Year**

**Honor Year**

**Honor Year**

**Honor Year**

**Honor Year**

**Honor Year**

**Honor Year**

**Have you been inducted into a USA Lacrosse Chapter Hall of Fame?**

**Chapter HOF Year**

**Chapter HOF Year**

**Chapter HOF Year**

Please list any other halls of fame or honorary organizations into which you have been inducted.

HOF/Organization Year

HOF/Organization Year

HOF/Organization Year

Please attach/include additional information if appropriate.

**USA LACROSSE ANTI-HARASSMENT AND DISCRIMINATION POLICY**

USA Lacrosse prohibits and will not tolerate acts of harassment, discrimination, and bullying. Harassment, discrimination or bullying means any gestures, any written, verbal or physical act, or any electronic communication, whether a single incident or a series of incidents that:

1. Are reasonably perceived as being motivated by either any actual or perceived characteristic, such as race, color, religion, ancestry, national origin, gender, sexual orientation, gender identity and expression, or a mental, physical or sensory disability.

1. Takes place in relation to any program function or team; and that a reasonable person should know, under the circumstances, will have the effect of physically or emotionally harming a player or damaging the player’s property, or placing a player in reasonable fear of physical or emotional harm to his/her person or damage to his/her property.

1. Has the effect of insulting or demeaning any player or group of players or creates a hostile environment for the player by interfering with a player’s participation or by severely or pervasively causing physical or emotional harm to the player. (N.J.S.L 18A:37-14).

Any US Lacrosse award recipient found in violation of this policy will have all honors revoked. Individuals nominated for US Lacrosse honors found in violation will be removed from consideration. Please initial your acknowledgment below.

\_\_\_\_  I have read and understand the US Lacrosse Policy on Anti-Harassment and Discrimination.

\_\_\_\_ I understand there are consequences of violating the US Lacrosse Anti-Harassment and Discrimination Policy.

**THIS QUESTIONNAIRE RESPECTFULLY SUBMITTED BY:**

Date

Name

Address

City State Zip

Home Phone: ( ) Work Phone: ( )

Cell Phone: ( ) E-mail:

Please submit all completed questionnaires to:

**USA Lacrosse**

**c/o Archivist**

**2 Loveton Circle**

**Sparks, MD 21152**

**410.366.6735 – fax**