



## Conflict of Interest Form

Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

**Potential assignments for all playoff games should consider the following information:**

High School that currently employs the official (if applicable) \_\_\_\_\_

High school that previously employed the official **(last 3 years)** \_\_\_\_\_

High school that the official attended as a student **(the last 5 years)** \_\_\_\_\_

High school that has an immediate family member of the official in attendance \_\_\_\_\_

High school in which the official is a member of an auxiliary organization (booster club, PTA, etc.) \_\_\_\_\_

Other school(s) with which the official has a conflict \_\_\_\_\_

Do you have an immediate family member playing varsity volleyball for an NSCIF high school?

Yes: \_\_\_\_\_ What School: \_\_\_\_\_

No: \_\_\_\_\_

**I certify that the information above is accurate.**

\_\_\_\_\_  
**Name (PRINTED)**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**Name (SIGNED)**