



RIPON CHIEFS FOOTBALL AND CHEERLEADING ORGANIZATION



BOARD APPLICATION

APPLICANT INFORMATION

_____		_____
LAST NAME	FIRST NAME	PHONE (HOME)
_____		_____
MAILING ADDRESS		PHONE (CELL)
_____		_____
CITY, STATE, ZIP CODE		EMAIL ADDRESS

POSITION(S) APPLYING FOR: _____

QUALIFICATIONS FOR THIS POSITION? _____

Have you ever been convicted of or plead guilty to any crime(s)? Yes No

If yes, please describe each in full: _____

Have you ever been denied/dismissed from participating in any other youth program? Yes No

If yes, please describe each in full: _____

Do you have any special training, skills, or techniques that you feel Yes No could be beneficial to our program?

Please Describe: _____

Please list two references that may be contacted if necessary:

Name & Number _____ Name & Number _____

Applicant Signature: _____ Chiefs Board Approval: _____