

APPLICATION for ADJUDICATOR TRAINING PROGRAM
FORM AT-003

INSTRUCTIONS: This application shall be accompanied by the following listed items and sent to:

TANYS, Attn: VPAS PO Box 4143, Rome, NY 13442

1. Your Theatrical Resume
 2. A narrative explaining "Why I Want to Become An Adjudicator"
 3. A non-refundable check or money order in the amount of \$25 payable to TANYS
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Name: _____

Address: _____

HOME

WORK

Phone Number: _____

Fax Number: _____

Best Time to Reach: _____

Cell Number: _____

E-Mail Address: _____

Do you have a well-maintained and safe automobile? YES NO

How far are you willing to travel from your home to an adjudication site?

Number of miles one way? _____ OR

Number of one way driving (in hours where 1 hour = 50 miles)? _____

At this time, do you have any questions. If so, please state the question(s), (Note: use reverse side or second sheet of paper.)

Signature: _____

Date: _____