



BASKETBALL OFFICIAL'S PROFILE SHEET CIF NORCAL REGIONAL & STATE BASKETBALL CHAMPIONSHIPS

This form must be signed and returned to your Association Assigner IMMEDIATELY. Please ensure that the form is legible.

You have been nominated for possible assignment to CIF Regional/State basketball championship games.

The 2026 CIF championship schedule is as follows:

2026 NORCAL REGIONAL GAMES
2026 STATE CHAMPIONSHIPS

March 3, 4, 5, 7, 10
March 13, 14

NOMINATED FOR BOYS GAMES: _____ GIRLS GAMES: _____ BOTH: _____

NOMINATED OFFICIALS ARE NOT GUARANTEED AN ASSIGNMENT TO A CIF REGIONAL OR STATE CHAMPIONSHIP GAME.

ASSOCIATION _____ CIF SECTION _____

NAME _____ ADDRESS _____

CITY _____ ZIP _____ WORK PHONE _____

HOME PHONE _____ CELL PHONE _____ ARBITER EMAIL _____

PRINT LEGIBLY

1. YEARS OF EXPERIENCE:

BOYS/MENS GAMES: HIGH SCHOOL VARSITY _____ JUNIOR COLLEGE _____ COLLEGE _____
GIRLS/WOMENS GAMES: HIGH SCHOOL VARSITY _____ JUNIOR COLLEGE _____ COLLEGE _____

2. (NEW NORCAL NOMINEES ONLY) PREVIOUS SECTION PLAYOFF EXPERIENCE, (BOYS & GIRLS GAMES), LAST FIVE YEARS

YEAR	ROUNDS	DIVISION	TEAMS

3. WHAT LEVELS, AND HOW MANY GAMES HAVE YOU BEEN ASSIGNED THIS SEASON? INDICATE THE NUMBER.

HIGH SCHOOL VARSITY – BOYS _____ GIRLS _____ JUNIOR COLLEGE – MEN _____ WOMEN _____
4 YEAR COLLEGE – MEN _____ WOMEN _____ DIVISION I ____ / ____ DIVISION II ____ / ____ DIVISION III ____ / ____ NAIA ____ / ____

4. IF A MEMBER OF ANOTHER HIGH SCHOOL BASKETBALL ASSOCIATION, PLEASE LIST _____

5. High School(s) you attended: _____ **City** _____ **State** _____
ARE YOU (OR A MEMBER OF YOUR IMMEDIATE FAMILY) EMPLOYED AT A CALIFORNIA HIGH SCHOOL OR DID MEMBERS OF YOUR IMMEDIATE FAMILY ATTEND OR GRADUATE FROM A CALIFORNIA HIGH SCHOOL(S)? YES ___ NO ___ IF YES, NAME OF SCHOOL(S) _____

6. MOST RECENT FORMAL TRAINING IN 3-PERSON MECHANICS DATE _____ BY WHOM _____

7. DURING THE 2025-26 SEASON I HAVE BEEN OR WILL BE ASSIGNED THE FOLLOWING NUMBER OF GAMES AS A MEMBER OF A 3-PERSON CREW?

HIGH SCHOOL: GAMES B ____ G ____ JUNIOR COLLEGE: GAMES M ____ W ____ 4 YEAR COLLEGE: GAMES M ____ W ____

I UNDERSTAND THAT I AM AN INDEPENDENT CONTRACTOR AND NOT AN EMPLOYEE OF THE CIF OR ITS MEMBER SECTIONS, LEAGUES OR SCHOOLS. (THIS FORM MUST BE SIGNED BY THE NOMINATED OFFICIAL.)

Signature or electronic signature _____

Date _____

THANK YOU FOR YOUR ASSISTANCE AND COOPERATION. QUESTIONS? PLEASE CALL HARRY SCHRAUTH, (510) 385-9239

SECTION
BASKETBALL OFFICIAL NOMINATIONS
2026 CIF REGIONAL AND STATE CHAMPIONSHIPS

BOYS' _____ GIRLS' _____ GAMES

[illegible]