

## APPLICATION for TANYS ADJUDICATOR TRAINING PROGRAM

**INSTRUCTIONS:** Complete this application and mail it with the items listed below to:

## TANYS Adjudicator Training, PO Box 4143, Rome, NY 13442

1) Your theatrical resume

2) A narrative explaining "Why I Want to Become a TANYS Adjudicator"

Name:				
Street Address:				
City:		State: Zip:		
	НОМЕ		WORK	
Phone Number:				
Best time(s) to reach:				
Cell Number (if differe	nt from above):			
E-Mail Address:				
Do you have a well-ma	aintained and safe automobile?	YES	NO	
How far are you willing	to travel from your home to an adjudic	ation sit	e?	
	ne way? OR riving one way (where 1 hour = 50 mile	s)?		
If you have any question	ons, please use reverse side or second	l sheet c	of paper.	
Signature:			Date:	

FORM AT-003 - REVISED 1/18/2020