



NATIONAL CATHOLIC FORENSIC LEAGUE
Candidate Nomination Form

1. Name: _____

Address: _____

Phone: _____

2. Diocese: _____

3. Desired Office: _____

4. Number of years coaching high school forensics: _____

5. ELECTED POSITIONS HELD:

NCFL: _____

LOCAL CFL: _____

NSDA: _____

STATE LEAGUE: _____

OTHER PROFESSIONAL AFFILIATIONS:

6. PERSONAL STATEMENT:

