

## **DATA SPECIALISTS TRAINEE - REPORTING FORM**

A person interested in becoming an Introductory Data Specialist and who would like to attend a clinic is required to fill out the questionnaire below.

Chief Data Specialists are asked to have these forms available and give them to any person interested in becoming a Data Specialist.

| NAME:ADDRESS:  |  |
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|  |  |
|  | DATE:  |
| 1. Name of the competition   |  |
| 2. Name of Chief Data Specialist   |  |
| 3. Responsibility at competition   |  |
| 4. Approximately how many of   | competitions have you worked?                          |
| 5. Do you wish to be notified of any future competitions within your immediate area?                 |  |
| -  | hat until you become an Interclub Data Specialist, you |
| 7. Do you realize that there may be some travelling involved once you become an                      |  |
| Interclub Data Specialist?   |  |
| 8. Are you prepared to travel?   |  |
| 9. If you have any comments or questions you would like answered please feel free to write them down |  |
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PLEASE MAIL TO: Sharon Dahl BC/YK Data Specialists Committee Chair 5748 Janis Street Chilliwack, BC V2R 3H6 e-mail: sharondahlis@gmail.com Fax: 604-882-7816