NOTIFICATION OF EJECTION REPORT

To be completed by officials and forwarded to director

Julius Palazzo impalazzo@juno.com 276-0323 fax

Marty Raines mraines@cdeducation.org 241-2563 fax

Sport:_____________________________ Date of report: _____ / _____ /______

Ejecting Official_________________________ Other Official__________________

Boys:_____   Girls:______ Grade level__________

Event Date:_____________ Time:___________ Location___________________

Reported Parish:_____________________________________________________

Other Parish: _______________________________________________________

Player ejection   Coach ejection   Other ejection___________________

Name of reported person:

1.__________________________________

2.__________________________________

Provide specific details explaining the events which resulted in the action taken.

Penalty imposed:

Athletic Director Notified on__________________________

Suspension enforced on__________________________