



Experience Update Form

Experience given on this form must be experience in the last five years. You must fill out position, track, dates, **AND** number of race days worked for each position you have held.

<u>Position</u>	<u>Track</u>	<u>Dates</u>	<u># of Race Days Worked</u>

*****Everything on this form must be filled out correctly to be given credit*****

STATEMENT OF TRUTHFULNESS

I certify that all of the information contained in this form is true and correct to the best of my knowledge.

Signature _____ Date _____

Please fax this form to (859) 296-3033 Attn ROAP
Racing Officials Accreditation Program, 821 Corporate Drive, Lexington, KY 40503
via email to contactus@horseracingofficials.com
www.horseracingofficials.com

