GREATER UNION COUNTY NEW JERSEY SOFTBALL UMPIRES ASSOCIATION, INC.

JUDICIARY FORM

NAME: _____ **LEAGUE:** _____

DATE: _____

PLEASE PROVIDE A COMPLETE DESCRIPTION OF THE INCIDENT OR COMPLAINT. INCLUDE NAMES; DATES, LOCATIONS AND ANY OTHER INFORMATION THAT WILL HELP US MAKE A COMPLETE APPRAISAL AND FINAL DISPOSITION OF THE SITUATION. INCLUDE PHONE NUMBERS AND ADDRESSES IF POSSIBLE AND COPIES OF ANY POLICE REPORTS IF AVAILABLE. ALL INFORMATION SUPPLIED ON THIS FORM WILL BE MADE AVAILABLE TO ALL PARTIES INVOLVED IN THE DISPUTE. UPON RECEIPT OF THE FORM WE WILL CONTACT ALL PARTIES, GATHER ALL INFORMATION AVAILABLE, AND ADVISE BOTH PARTIES OF AN AGREED UPON MEETING DATE, VIA UNITED STATES MAIL, CERTIFIED RETURN RECEIPT. AFTER THE MEETING WE WILL INFORM ALL PARTY'S WITHIN 48 HOURS OF OUR DECISION VIA UNITED STATES MAIL, CERTIFIED RETURN RECEIPT, UNLESS CONDITIONS PREVAIL THAT WOULD PREVENT US FROM MAKING A DECISION WITHIN THIS TIME FRAME. UPON RECEIPT, IF YOU DO NOT AGREE WITH THE JUDICIAL BOARDS FINDINGS OR PENALTIES, YOU CAN PETITION THE BOARD OF DIRECTORS VIA UNITED STATES MAIL, CERTIFIED RETURN RECEIPT FOR AN APPEAL. THE BOARD WILL INFORM YOU OF AN APPEAL DATE WITHIN 48 HOURS, VIA UNITED STATES MAIL, CERTIFIED RETURN RECEIPT. THE FINAL OPINION OF THE BOARD OF DIRECTORS WILL BE BINDING, AND NOT SUBJECT TO APPEAL.

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CONTINUE ON ADDITIONAL SHEETS IF REQUIRED

DATE RECEIVED: _____ **MEETING DATE:** _____

RECEIVED BY: _____ **MAILED:** _____

01.08.04