Little Chute Middle School Athletic Association (MSAA) Volunteer Basketball Coach Application Form

City: _____ State: _____ Zip: _____

Mailing Address (_____
(Home) (Business)

Previous states resided in over the past 5 years: _____

Date of Birth: _____ Email Address: _____
(mm / dd / yyyy)

Social Sec. #: -- --

Occupation: _____

Employer: _____

Previous/current volunteer experience (e.g. baseball/softball and year): _____

Do you have children in the program? YES _____ NO _____

If yes, at what level? _____

Special Certification (i.e. CPR, Medical, etc.): _____

Do you have a valid driver's license? YES _____ NO _____

Driver's License#: _____ State: _____

Have you ever been convicted of a felony? YES _____ NO _____

If yes, provide your current legal status (parole, etc.)_____

Have you ever been convicted of **any** crime involving or against a minor? YES _____ NO _____

Have you ever plead guilty to or been convicted of any other type of crime? YES _____ NO _____

If yes, explain: _____

Have you ever been refused participation in any other youth programs?

If yes, explain: YES _____ NO _____

In which of the following would you like to participate? **("X" all appropriate areas.)**

Head Coach _____ Asst. Coach: _____ Boys Girls

5th Grade _____ 6th Grade _____ 4th Grade _____

Other: _____

I hereby swear and attest that all information provided on this application is true and complete to the fullest extent of my knowledge. If I am accepted as a coach, the Little Chute MSAA may end the relationship if I have made any false statements or material misrepresentations, written or verbal. As a condition of volunteering, I hereby grant permission to the Little Chute MSAA to conduct a background check on me, which may include a review of database records including but not limited to sex offender registries, child abuse and criminal history records. I understand and agree that, if appointed, my position is conditional upon the association receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the Little Chute MSAA, and volunteers thereof, and/or any other person or organization that may provide such information.

I understand that, regardless of previous coaching assignments, Little Chute MSAA is not obligated to appoint me to a volunteer position. I understand that, prior to the expiration of my season, I am subject to removal by the Association's Officers for any and all violations of the Association's policies or principles.

_____ _____

Applicant Signature **Date**

Applicant Name (Print): _____

NOTE: The Little Chute MSAA will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

For Little Chute MSAA Use Only. Please print the name of the individual who submitted the background check on the volunteer and who the background check should be returned to.

Background check submitted by MSAA officer: _____

Background check completed by: Little Chute Area School District

Returned to: _____ Date Completed: _____
(Name and telephone number)

System(s) used for background check (minimum of one must have "X"):

Online multistate database: _____ State/Local Criminal History Records: _____
(Infomart, Intellicorp., etc.)

Cost of background check _____

Note: The Little Chute MSAA will maintain copies of background check results at the association level for the duration of the volunteer's service to the league.