

St. Stephen-St. Edward School
Coaching Application & Volunteer Screening Form

This form is to be completed by all applicants for any position involving the supervision or custody of minors. It will help our school family provide a safe and secure environment for our youth who participate and use our facilities.

Please check all positions for which you would like to be considered:

- | | |
|---|---|
| <input type="checkbox"/> Basketball Head Coach | <input type="checkbox"/> Cheerleading Head Coach |
| <input type="checkbox"/> Basketball Assistant Coach | <input type="checkbox"/> Cheerleading Assistant Coach |
| <input type="checkbox"/> Soccer Head Coach | |
| <input type="checkbox"/> Soccer Assistant Coach | |

Background Screening Consent

Applicant should complete all relevant information and sign and date the form.

I, _____, hereby authorize **St. Stephen-St. Edward School (St. Stephens)** and/or its agents to make an independent investigation of my background that may include: references, character, past employment, education, credit history (if applicable for position), adult criminal or police records, and motor vehicle records including those maintained by both public and private organizations and all public records for the purpose of confirming the information contained on my Application and/or obtaining other information which may be material to my qualifications for service now and, if applicable, during the volunteer time at **St. Stephens**.

I release **St. Stephens** and its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or law suits with regard to the information obtained from any and all of the above referenced sources. The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

Full Name (Printed) _____

Maiden Name or Other Names Used _____

Social Security Number: _____ Driver's License Number: _____

Present Address _____

City _____ State _____ Zip _____

How Long at Present Address? _____

Have you ever coached before? _____

If yes what position(s) and where? _____

Why do you want to coach? _____

What additional skills do you have that may add value to our program: _____

Signature of Applicant / Date

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By showing interest to coach a St. Stephens sports team, you have shown an interest in trying to make a difference in the life of a child. We would like to take this opportunity to first thank you for your interest in coaching this year. We would also ask that you to take a few minutes to review the requirements / expectations of all of our coaches. Your signature on this application confirms your commitment to these requirements.

As a St. Stephens coach, you must agree to meet and uphold the following requirements and expectations as set forth by the athletic board.

- ✓ *Demonstrate self-control in all situations.*
- ✓ *Prepare for practices by having a practice plan.*
- ✓ *Commit to teaching the fundamentals of the game.*
- ✓ *Commit to communicating in a positive an upbeat manner with all of my players.*
- ✓ *Commit to creating an open line of communication with my players parents, making sure to notify them of any changes in scheduling or special events that may be taking place.*
- ✓ *Commit to ensuring the safety of all the participants.*

We hope that you will consider the responsibilities / expectations that have been outlined here as you consider whether or not you would like to coach for St. Stephens. The expectations are high and the challenge is great but the reward is greater still.

St. Stephens
Athletic Board

For office use only –

Background Check Complete (date) _____

References Contacted – Comments
