S&C SPORTS AND DEVELOPMENT, INC.

VOLUNTEER COACH APPLICATION



MISSION

Our mission is to develop athletic and academic success within the youth community to increase their chances for college entry.

VISION

We envision a unified team of student athletes who are highly motivated and have developed the athletic and academic skills necessary to compete locally, regionally, nationally, and internationally in their field of interest. Our youth members will have the opportunity to gain the recognition of divisional colleges and universities through DETERMINATION, as they are encouraged to push beyond their own best. We will foster the athletic and academic development of disadvantaged youth in our community and give them a place where they can strive to be excellent and enhance their circumstances.

S&C Sports and Development, Inc.

Volunteer Coach Application

Please Read All Terms and Conditions Carefully S&C Sports and Development, Inc.(SCSD) will not discriminate against any person(s) seeking the opportunity to volunteer and participate in any capacity on the basis of race, creed, color, national origin, marital status, gender, sexual orientation, or disability.

PURPOSE: This form allows the SCSD Board to follow a regimented process for the review and selection of volunteers to fill coaching positions within SCSD for the upcoming 2020 Season. Having prior coaching or volunteer experience at any level is not a requirement for application with SCSD. Prior to any individual being appointed as a coach they must submit a completed application, agree to a background check/investigation and interview with SCSD Board.

PRIVACY POLICY: SCSD collects information from coaching applicants for the purposes of determining eligibility and suitability and to conduct or receive background check/investigations necessary to ensure the safety of our participants. We will not collect any information that is not reasonably necessary to volunteer in this program. Except for the information necessary to conduct background investigations, we will not disclose applicant information to any third party.

INSTRUCTIONS: Please fill out ALL information requested. No person shall be considered for any position within SCSD coaching staff until a completed application is submitted and approved by the SCSD Board. Also, by volunteering you agree to follow all rules and regulations as set forth by SCSD and understand that failure to comply with all rules can result in termination as a volunteer coach. All applications are subject to review and approval by SCSD Board.

If you are appointed a volunteer position with SCSD you will be required to complete all USATF (for track & field coaches only) and AAU (for all coaches) SafeSports Certification and Background Clearance no later than the first day of practice. Potential coaches applying after the first day of practice will not receive appointment until all background investigations are complete. Applicants CANNOT and WILL NOT be on the track, field, or court until they have received approval from SCSD Board.

INQUIRIES Please direct all inquiries about this application to the SCSD Board Chairwoman, Kasia Carr at kasiacarr@blazerstrackclub.org

Applicant's Infor	RMATION		For office use only Approved by Date
Full Name		Prefer	red Name
Address			
City	State	Zip	
Cell Phone	Alterr	nate Phone	
Personal Email		Shirt S	Size
CPR and/or First Aid of	certified? □ Yes □ No	If yes, Card level/Titl	e:
Please provide a copy	of your CPR Card with this	application.	
Please list any childre	en you have playing in an	y SCSD sport:	
Child's name:		Progra	am:
Child's name:		Progra	ım:
Child's name:		Progra	ım:
Position volunteering	for (please check one):		
Head Coach	Assistant Coach	□ Team Mom/Dad	Team Volunteer
Program (please chec	k one):		
Track & Field	□ Football	Basketball	□ Cheerleading
Employment /nfo	RMATION		
Current Employer		Work P	Phone
Address			
City		Zip	
Occupation/Position _		Years employ	ved

QUALIFICATIONS/COACHING EXPERIENCE

Do you have experience coaching? Yes No If yes, which sports?					
Track & Field	Football	[□ Basketball	□ Cheerleading	
□ Other(s)					
Please list the three	e most recent c	oaching position	ons you have he	ld:	
From:	То:	Age Group: _			
Organization/Locat	tion				
Position					
Additional info (op	tional):				
From: Organization/Locat					
Position					
From: Organization/Locat		•			
Position					

Have you *participated in* track & field (T&F coaches only)?
□ Yes □ No If yes, please list experience:

Have you officiated track & field (T&F coaches o	only)? □ Yes □ No If yes, please list experience:
Have you <i>played</i> football (football coaches only)	
Have you <i>officiated</i> football (football coaches or	nly)? □ Yes □ No If yes, please list experience:
Have you <i>played</i> basketball (basketball coaches	s only)? □ Yes □ No If yes, please list experience:
	nes only)? □ Yes □ No If yes, please list experience:
Have you <i>participated in</i> stunt cheering (cheerin experience:	ng coaches only)? □ Yes □ No If yes, please list
Please list any experience you may have volunt	eering, playing or officiating other sports:

Why do you want to be a volunteer for SCSD?

	de at least three personal references who are not relative
Reference Name	Phone
Affiliation	
Reference Name	Phone
Affiliation	
Reference Name	Phone
Affiliation	

Please feel free to include with this application letters of recommendation from any references.

$\mathcal{B}_{\mathsf{ACKGROUND}}\mathcal{C}_{\mathsf{HECK}}$

Have you ever been refused participation in any youth sports organization? \square Yes \square No

If yes, please explain: _	 	 	

Is there any information regarding your background for which we should be aware?
Yes
No

If you checked yes to any of the above questions, please fill out the VOLUNTARY DISCLOSURE FORM.

As a condition of volunteering, I give permission for S&C Sports and Development, Inc. (SCSD) to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon SCSD receiving no information of inappropriateness in my background. I hereby release and agree to hold harmless from liability the SCSD officers, volunteers, and any other person or organization that may provide such information. I also understand that, regardless of previous appointments, SCSD is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, if I violate any SCSD policies or principles as outlined in the Bylaws, or undertake any activity that is deemed by the Board not to be in the best interest of our student athletes or the organization programs, I will be subject to suspension and/or removal by the SCSD Board.

Full Legal Name	Social Security Number
Date of Birth	Place of Birth
Please attach a copy of your driver's license or governmen	nt issued identification to this application.
Are you a USATF Certified and Cleared Coach?	□ No Member Number
Please attach a copy of your member card	
Are you an AAU Certified and Cleared Coach? Yes	□ No Member Number
Please attach a copy of your member card	
Signature	Date
Please return your completed application	ation and all attachments to:
S&C Sports and Development, Inc. 828 O	ur Street, Fayetteville, NC 28314
ATTN: Chairman or Chairw	oman of the Board

VOLUNTARY DISCLOSURE STATEMENT, BACKGROUND VERIFICATION, AND RELEASE FORM Complete and return to: S&C Sports and Development, Inc., 828 Our Street, Fayetteville, NC 28314



This form must be printed out, completed in full and signed. It **CANNOT** be submitted electronically. Mail your completed form to the address listed above at the same time you submit your application. Questions? Write to admin@blazerstrackclub.org. Please note, if you are not a US citizen, fill out the form to the best of your ability and then also submit police checks from countries you have lived in for a year or more since turning 18.

Current Information – ALL FIELDS REQUIRED

Full Legal Name				
	First	Middle	L	.ast
Social Security Number or ITIN		Date of Birth (MM/DD/YYYY)		
Street Address		City	State	Zip
Phone	Alternate	Phone		
Attach a copy of your of	current Driver's License or Go	overnment Issued Ide	ntification Card	

Prior Information

1. Other legal name(s) by which you are (or have been) known:

2. List below your previous residences since you were 18 years of age, or for the last five years, whichever is longer (include college and home residences):

City	State	Years
City	State	Years

List any additional address on a separate piece of paper.

3a. Check the box YES or NO for the following questions.

Have you ever been convicted of any crime relating in any manner to children and/or your conduct with them?

🗆 Yes 🗆 No

Have you ever been convicted of, or entered a plea of no contest to, any crime against persons?

🗆 Yes 🗆 No

Have you been convicted of, or entered a plea of no contest to, any of the following and/or any crime similar in any manner to indecent assault and battery on a child or mentally disabled person, rape, assault with the intent to commit rape, kidnapping of a child under sixteen with intent to commit rape, intent to commit any of the above crimes?

🗆 Yes 🗆 No

Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of children?

🗆 Yes 🗆 No

Are you now or have you ever been subject to any court order involving sexual or physical abuse of a minor, including but not limited to a domestic order or protection?

🗆 Yes 🗆 No

Have your parental rights ever been terminated for reasons involving sexual or physical abuse of children?

🗆 Yes 🗆 No



3b. If you answered "yes" to any question in section 3a, explain below. Attach a separate sheet of paper if necessary.

Volunteer Authorization and Information Release Statement

I authorized S&C Sports and Development, Inc. to confirm all statements contained in my volunteer application materials. I also authorize the parties listed in said materials to disclose to SCSD pertinent information regarding my prior involvement/activity with them and/or their organizations. I understand that my ability to volunteer with SCSD will be contingent upon the receipt of satisfactory reports. I have made no willful misrepresentations, omissions, or falsifications within my volunteer application materials or during the course of representing myself to SCSD. I understand that should investigation disclose such misrepresentations, omissions, or falsifications in the information I have submitted or presented, my request to volunteer with SCSD can be immediately rejected.

I authorized SCSD to run a criminal history check and run my name against any database of sexual offenders. I understand that SCSD may deny involvement of any volunteer who answers "yes" to any of the questions in section 3a above and that if selected as a volunteer, I may be terminated immediately if SCSD discovers circumstances that would indicate a "yes" to any of those questions. I further understand that SCSD may dismiss any volunteer if that person is found to have a history of complaints of abuse of or misconduct with a minor or have resigned, been terminated, or been asked to resign from a position whether paid or unpaid, due to complaint(s) of sexual abuse of a minor, regardless of when discovered.

Signature	Date	
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For office use only					
Date of	Person Checking	Check Began?	Criminal Record	Notes	
Background Check		(Y/N)	Found? (Y/N)		
Additional Notes:					