

2016 NJ AYF - JERSEY SHORE CONFERENCE

BACKGROUND CHECK APPLICATION

PLEASE NOTE: A copy of a valid government-issued photo identification must be attached to this application.

Name: _____	Date: _____	Special professional training, skills, hobbies: _____
Prior/Maiden Names or Aliases: _____		
Address: _____		Community affiliations (Clubs, Service Organizations, etc.): _____
Telephone: _____	Email: _____	
City: _____	State: _____	Zip: _____
Mailing Address (if different): _____		Previous/current volunteer experience (e.g. baseball/softball and years): _____
Previous states resided in the past 5 years: _____		Do you have children in the program? YES _____ NO _____
		If yes, at what level? _____
Date of Birth: _____ (mm / dd / yyyy)		Special Certification (i.e. CPR, Medical, etc.): _____
		Have you ever been convicted of a felony? YES _____ NO _____
Social Security Number: _____		If yes, provide your current legal status (parole, etc.) _____
Occupation: _____		Have you ever been convicted of any crime involving or against a minor? YES _____ NO _____
Employer: _____		
Address: _____		Have you ever plead guilty to, been convicted of or involved with any other type of crime? If yes, explain: YES _____ NO _____
Do you have a valid driver's license? YES _____ NO _____		
Driver's License#: _____	State: _____	
		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" one or more.)

League Official: _____	Head Coach: _____	Board Member: _____	Equipment Manager: _____	Assist. Coach: _____
Team Mom: _____	Coach Trainee: _____	Trainer: _____	Student Demo: _____	
Other: _____				

Association Name: _____

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Official 2016 Volunteer Application. (Page 2) Do NOT use forms from past years.

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Please list three references, aside from family members, at least one of which has knowledge of your participation as a volunteer in a youth program:

<u>Name:</u>	<u>Nature of Relationship:</u>	<u>Phone #:</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

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 volunteer, The League may end the relationship immediately if I have made any false statements or material misrepresentations, written or verbal. As a condition of volunteering, I hereby grant permission to NJAYF 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 in compliance with NJAYF'S child protection policy. I understand and agree that, if appointed, my position is conditional upon the league receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability the local AYF, AMERICAN YOUTH FOOTBALL, Incorporated, the officers, employees and volunteers thereof, and/or any other person or organization that may provide such information.

I also understand that, regardless of previous appointments, The League is not obligated to appoint me to a volunteer position. I understand that, prior to the expiration of my term, I am subject to suspension by the President and removal by the Board of Directors for any and all violations of AMERICAN YOUTH FOOTBALL policies or principles. Furthermore, I hereby attest that all contact information provided herein is up to date and I hereby grant NJAYF Inc. and its partners permission to utilize such contact information for communications and promotions during my tenure as a volunteer.

Applicant Signature

Date

Applicant Name (Print or Type): _____

NOTE: NJ AYF, Inc. will not discriminate against any person on the basis of race, creed, color, national origin, marital status, gender, sexual orientation or disability.

For Local Use Only. Below please print the **legal name** of the individual who performed the background check on the applicant and name of the local organization.

Background check completed by Association officer: _____
or
Background check completed by League officer: _____
or
completed by: _____ Date Completed: _____

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

Online multistate database: _____ State/Federal Criminal History Records: _____ FEDERAL Sex Offender Registry _____ Other (please explain): _____
(Choicepoint, etc.)

**** NOTE:** A State Sex Offender Registry check alone is NOT sufficient to comply with Article 21 and MIUST be

supplemented by one or more of the above

LEAGUES: You must maintain copies of background check results at the league level for the duration of the volunteer's service.