



TYSA Background Check Application
APPLICATION FOR ADULT VOLUNTEER PROGRAM PARTICIPATION

Check the program: __ Flag Football __ Soccer __ Basketball __ Volleyball __ Softball __ Baseball __ Cheer __ Board

Circle the position: __ Head Coach __ Asst. Coach __ TYSA Board Member

Board Position: __ President __ Vice-President __ Treasurer __ Secretary __ Public Relations __ Commissioner

Name: _____

Address: _____

City: Zip: _____

Drivers License #: _____

Expiration: _____

DOB: _____

Day Phone: _____

Cell Phone: _____

E-Mail: _____

Employer: _____

REFERENCES: List below references for expertise and/or personal evaluation – do not include relatives.

Name _____ Phone _____ How Long Known _____

Name _____ Phone _____ How Long Known _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY/CRIME?

YES ___ NO ___ If answer is YES, explain.

(Use back of form if necessary)

LIST ANY APPLICABLE EXPERIENCE THAT WOULD RELATE TO YOUR PERFORMANCE IN THE POSITION FOR WHICH YOU HAVE MADE APPLICATION. INCLUDE DATES OF PARTICIPATION, DESCRIPTION OF THE POSITION, LOCATION OF PERFORMANCE AND SUPERVISORY PERSONNEL. Of particular interest would be experience in dealing with children 4 to 14.

IN CASE OF EMERGENCY NOTIFY: _____ **Phone:** _____

AFFIDAVIT

I have read all of the above and I declare under penalty of perjury that the foregoing is true and correct. I hereby give Tioga Youth Sports Association authority to perform background checks and to verify all information contained in the above application. I understand that untrue or incomplete answers discovered subsequent to participation in the volunteer program(s) of the Tioga Youth Sports Association may result in removal from the program.

Signature of Applicant: _____ DATE: _____

TYSA ONLY

Applicant Approved: Yes ___ No ___

Received By: _____