

# Whiteford Agricultural Schools Volunteer Coaching Application

School Year: \_\_\_\_\_

**A copy of your driver's license must accompany this application.**

Criminal record background checks shall be completed per Board of Education Policy 4120.09.  
To protect your privacy, this form will only be seen by designated representatives of Whiteford Schools.

Name \_\_\_\_\_ Date \_\_\_\_\_ Are you over 18? \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

I am requesting to volunteer in the following sport(s) (list gender and/or level):

**FALL SEASON – Due by June 15**

- |                                              |                                                         |
|----------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Cheerleading        | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Cross Country–Boys  | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Cross Country–Girls | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Football            | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Volleyball          | <input type="checkbox"/> MS <input type="checkbox"/> HS |

**WINTER SEASON – Due by September 15**

- |                                           |                                                         |
|-------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Basketball–Boys  | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Basketball–Girls | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Cheerleading     | <input type="checkbox"/> MS <input type="checkbox"/> HS |

**SPRING SEASON – Due by January 15**

- |                                              |                                                         |
|----------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Baseball            | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Softball            | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Track & Field–Boys  | <input type="checkbox"/> MS <input type="checkbox"/> HS |
| <input type="checkbox"/> Track & Field–Girls | <input type="checkbox"/> MS <input type="checkbox"/> HS |

Experience for position(s) in which you are applying:

**Volunteer Guidelines/Expectations (see back for release information):**

1. "Volunteer" – a person from the community who contributes their services on a regular basis.
2. Volunteer coaches are assigned to help the regular staff provide better instructional service to students.
3. Volunteer coaches shall work only under direct supervision of the designated staff member. You are not a replacement for the regular staff member.
4. Volunteer coaches must abide by school, team and program regulations, rules or decisions. It is also expected that you report any violations of the regulations, rules or decisions to school administration.
5. Volunteer coaches are not to make personnel decisions (i.e., disciplinary actions, etc.).
6. Volunteer coaches are not to deal directly with parent concerns, and should refer all contacts by parents to the regular staff member.
7. Volunteer coaches are not to treat injuries (except emergency first aid) or prescribe rehabilitation programs.
8. Volunteer coaches are not to receive any compensation for their services. The experience may become part of their resume and we will gladly provide references.
9. A volunteer is personally responsible for their actions. Inappropriate conduct may result in the individual being asked to discontinue their relationship with the program.
10. The Athletic Director and the Middle/High School Principal must approve volunteer coaches and all coaches must complete designated safety training before they begin working with student-athletes.

Have you ever been convicted of a crime or are there any felony charges against you? ☐ Yes ☐ No

I authorize Whiteford Agricultural Schools to conduct a criminal records check in connection with my volunteer services; and hereby consent to the release of such records. (NOTE: A criminal record will not necessarily disqualify an applicant. A criminal record is one piece of information that will be considered in determining the appropriateness of an individual to be a volunteer coach for Whiteford Schools.)

I have read the volunteer guidelines/expectations above and on the reverse side of this sheet and agree to abide by them.

Applicant Signature \_\_\_\_\_

Date \_\_\_\_\_

**Please return this form to the Middle/High School Office.**

MS/HS Principal Approval: \_\_\_\_\_

Date \_\_\_\_\_

Athletic Director Approval: \_\_\_\_\_

Date \_\_\_\_\_

**VOLUNTEER RELEASE FORM**

I have offered my services as a volunteer to help the School District in the following areas:

I agree to abide by all relevant Board policies and administrative guidelines while on duty for the District. I understand that, although I am covered under the District's liability insurance policy, I am not covered by its health insurance policy nor am I eligible for workers' compensation. Should I become ill or suffer an accident while doing volunteer work for the District, I agree that I shall be responsible for any and all hospital and medical charges that may accrue.

I understand further that, as a volunteer, I am not in any manner considered an employee of the District or entitled to any benefits provided to employees. I further release the Board of Education from any and all liability for any damages, whatever their nature, which may result as a consequence of my volunteer service.

For the protection of the children in the school, the District is required by law to inquire of its staff members whether or not they have been convicted of a crime related to children. We would appreciate our cooperation by indicating that you have never been convicted of any of the following offenses: *aggravated murder, murder, voluntary manslaughter, involuntary manslaughter, felonious assault, aggravated assault, assault, aggravated menacing, abuse or neglect of a child, kidnapping, abduction, child stealing, criminal child enticement, rape, sexual battery, corruption of a minor, gross sexual imposition, importuning, voyeurism, public indecency, felonious sexual penetration, compelling prostitution, promoting prostitution, procuring prostitution, disseminating matter harmful to juveniles, pandering obscenity, pandering obscenity involving a minor, pandering sexually -oriented matter involving a minor, illegal use of a minor in nudity-oriented material or performance, endangering children, contributing to the delinquency of children, carrying concealed weapons, improperly discharging a firearm at or into a school or house, corrupting another with drugs, placing harmful objects in or adulterating food or confection.*

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 Volunteer

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 District Witness

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 Date

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