



TOWN OF DRYDEN
Recreation Department
 93 EAST MAIN STREET
 DRYDEN, NEW YORK 13053-9505
 TEL: 607-844-8888
 FAX: 607-844-8008



Coach/Volunteer Background Screening Application
 (attach a copy of a valid government issued ID)

All volunteers who have direct contact with youth while volunteering with Dryden Recreation must submit this application and sign the Background Screening Acknowledgment section. Your signature on this application signifies that you agree to allow the Town of Dryden or an assigned agency to perform a criminal background screening. This screening will include a review of sex offender registries, child abuse, and criminal history records.

Program _____ **Age Level** _____

Coach/Volunteer Information

Full Legal Name _____ **Date of Birth** ____/____/____

Driver's License Number: _____ **State of Issue:** _____

Social Security Number: _____ **Home Phone (____)** _____

Previous (or Maiden) Name _____

Current Address _____

City _____ **State** _____ **Zip Code** _____ **County** _____

E-mail _____

Coaching Certification: Yes / No **First Aid Training:** Yes / No

If yes, provide program and Member Number _____ **CPR Training:** Yes / No

Have you played this sport? (When, where, at what level?) _____

How would you describe yourself as a youth sports coach? What is your coaching philosophy? (winning, having fun, discipline, teamwork, etc...) _____

Are you willing to take direction from the Recreation Coordinator/ Program Director?
 (what drills to use, advise, working as a team with other coaches, working with parents/the public, etc) Circle **Yes / No**

Are you willing to enforce and promote the Town of Dryden Recreation Department's Codes of Conduct for Coaches, Players and Parents? Circle **Yes / No**

DISCLOSURE and AUTHORIZATION – BACKGROUND INVESTIGATION

Acknowledgement and Authorization

By signing below, I authorize Client or its authorized agents to obtain or prepare consumer reports or investigative consumer reports about me. I acknowledge receipt of a copy of the federal notice entitled A Summary of Your Rights under the Fair Credit Reporting Act and certify that I have read this Disclosure and Authorization as well as the summary document explaining my rights under the Fair Credit Reporting Act. Under state law you have the right to inspect and receive a copy of any investigative consumer report requested by Client by contacting Protect Youth Sports directly. You also acknowledge receipt of a copy of Article 23-A of the New York Correction Law by checking the below box.

I wish to receive a copy of any report on me that is requested.

I hereby release and hold harmless from liability the Town of Dryden Recreation Department, the officers, employees, agents, volunteers thereof, and any other person or organization that may provide such information in accordance with the laws of the United States. I further understand that previous acceptance as a Town of Dryden Recreation Department Volunteer does not obligate the Town of Dryden Recreation Department or its local Association, to accept my current application.

I have not been convicted, including crimes the record of which has been expunged or pleas of “no contest”, disciplined, or discharged from employment for committing or attempting to commit crimes in the areas of, but limited to Child abuse, murder, kidnapping, neglect, child pornography, juvenile prostituting or pimping, sexual abuse of a minor, manslaughter, arson, abuse causing child’s death, child exploitation, physical abuse, assault, criminal sexual conduct, prostitution related crimes, controlled substance crimes.

- I have not been convicted of any offense in any other state or against the laws of the United States which if committed or attempted in this state would have been punishable as one or more of the foregoing enumerated offenses.
- I have not been adjudged liable for civil penalties or damages involving sexual or physical abuse of children.
- I have not been subjected to any court order involving any sexual abuse or physical abuse of a minor, including but not limited a domestic order for protection.
- I have not ever had my parental rights terminated
- I understand that I have an ongoing obligation as a volunteer of this organization to promptly report any conviction in those areas described above. (If you have committed or attempted to commit any of these crimes, please explain the circumstances related to the situation on a separate sheet of paper).

Reference (not a family member): _____ Phone Number: (____) _____

By signing the application you are designating that all of the above statements are true and correct.

Signature: _____ **Date:** _____