

# OIPRD VOLUNTEER COACH APPLICATION

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Please read through each page carefully and complete all required areas completely and accurately.

## **Coach Information:**

To receive full consideration to coach / volunteer through Orcas Island Park and Recreation District (OIPRD) you will need to:

1. Complete the registration application.
2. Pass all coach training requirements.
3. Attend mandatory coach meetings, league meetings and coach clinics offered by the organization. Dates and times will be communicated via email to the email address listed on your account.
4. Take the online training modules contained within this registration.
5. Pass required criminal background check as requested.

## **About the Coaches:**

All coaching members need to complete the coach application to be on the court / field during practices / games. No previous coaching experience is required. We provide coach meetings, clinics and online resources to assist you in making the season a success. We request that each coach understand and accept that the program is for the players and our goals are to teach them about individual sports and life skills; Coaches shall provide a safe and positive environment to encourage the growth and development of each student athlete to the best of their ability. They must always model and reinforce the positive aspects of athletic participation such as having fun, building camaraderie, teamwork, and sportsmanship.

While many of the coaches have children in the program and coach on their children's teams, we have coaches that may participate without having a child in the program. It is not a requirement of our coaches that they have a child in the program to coach.

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## **Coach Selection Process (All Coaches):**

Coaching assignments are largely based on team formation. Due to the length of time registration is open, and the complications associated with determining how many teams will be formed, the notification of coaching assignments may be done closer to registration closing. For those same reasons, no one can count on a coaching assignment until they are advised of such. Being a coach the previous year is not a guarantee you continue as one going forward.

## **Program Philosophy for Coaches:**

1. Make it a fun and positive experience for everyone involved in the team.
2. Create and build on sportsmanship and other meaningful character traits throughout the season.
3. Teach athletic and life skills for success in life.

**Please complete and provide certification for the following trainings as part of the application process.**

### **Concussion Training:**

<https://www.cdc.gov/headsup/youthsports/training/index.html>

### **Sudden Cardiac Arrest Course:**

<http://www.wiaa.com/subcontent.aspx?SecID=1096>

### **Positive Coaching Alliance, Coach Courses:**

(please complete a minimum of one course)

<http://shopping.positivecoach.org/Courses>

### **First Aid/CPR/AED/BBP Training:**

<http://orcasfire.org/cpr-first-aid-certification>

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## **Please Read All Terms and Conditions Carefully**

OIPRD will not discriminate against any person(s) seeking the opportunity to volunteer and participate in any capacity on the basis of race, creed, color, natural origin, marital status, gender, sexual orientation, age, or disability.

***Purpose:*** This form allows OIPRD staff to follow a regimented process for the review and selection of volunteers to fill Head Coach and Assistant Coach positions within OIPRD for the upcoming season. Having prior coaching or volunteer experience at any level is not a requirement for application with OIPRD. Prior to any individual being appointed as an OIPRD coach they must submit a completed application, pass a criminal background check and receive confirmation of acceptance by OIPRD.

***Privacy Policy:*** OIPRD collects information from coaching applicants for the purposes of determining eligibility and suitability and to conduct background investigations necessary to insure the safety of our participants. We will not collect any information that is not reasonably necessary to participate 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 volunteer position within the OIPRD until a completed application is received and approved by OIPRD. Also, by volunteering you agree to follow all rules and regulations as set forth by OIPRD and related Leagues (i.e., SWISH, SVYSA, NCYFL, etc.) and understand that failure to comply with all rules can result in termination as a volunteer coach.

***Inquiries:*** Please direct all inquiries about this application to OIPRD, Kim Kimple at: [kimi@oiprd.org](mailto:kimi@oiprd.org)

# OIPRD VOLUNTEER COACH APPLICATION

## APPLICANT'S INFORMATION

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Personal Email: \_\_\_\_\_

CPR and/or First Aid certified? \_\_\_\_\_

*Please provide a photocopy of your card with this application.*

If yes, Card level/Title: \_\_\_\_\_

State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Zip: \_\_\_\_\_

Shirt Size: \_\_\_\_\_

### **Please list any children you have participating in OIPRD Programs:**

Child's name: \_\_\_\_\_

Child's DOB: \_\_\_\_\_

Child's name: \_\_\_\_\_

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Child's name: \_\_\_\_\_

Child's DOB: \_\_\_\_\_

### **Position Volunteering for (please circle one):**

*Head Coach*

*Assistant Coach*

*Team Parent*

*Other*

# OIPRD VOLUNTEER COACH APPLICATION

## EMPLOYMENT INFORMATION

Employer: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State: \_\_\_\_\_

Work Phone: \_\_\_\_\_

Zip: \_\_\_\_\_

Occupation/Position: \_\_\_\_\_

Years employed: \_\_\_\_\_

## QUALIFICATIONS

Do you have coaching experience? If yes, please explain.

Please list the three most recent coaching positions you have held:

Organization/Location:

From/To: \_\_\_\_\_ / \_\_\_\_\_

Positions Held/ Age Group Coached:

Organization/Location:

From/To: \_\_\_\_\_ / \_\_\_\_\_

Positions Held/ Age Group Coached:

Organization/Location:

From/To: \_\_\_\_\_ / \_\_\_\_\_

Positions Held/ Age Group Coached:

# OIPRD VOLUNTEER COACH APPLICATION

What sports/activities did you play/participate in as a child, teen, and/or adult?

Have you officiated a sport? If yes, please list experience:

Why do you want to volunteer for OIPRD?

Please list any experience you may have in other volunteer positions:

## **PERSONAL REFERENCES**

Please provide at least three personal references who are not relatives:

Contact Name:

Phone:

Affiliation:

Contact Name:

Phone:

Affiliation:

Contact Name:

Phone:

Affiliation:

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

# OIPRD VOLUNTEER COACH APPLICATION

## **BACKGROUND CHECK**

Have you ever been refused participation in volunteering with or around children?

If yes, please explain:

Have you ever been convicted of a felony?

Did the conviction deal with a minor?

As a condition of volunteering, I give permission for OIPRD 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 OIPRD receiving a clear record on my background. I hereby release and agree to hold harmless from liability the OIPRD officers, volunteers, and any other person or organization that may provide such information. I also understand that, regardless of previous appointments, OIPRD 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 OIPRD policies or principles as outlined in the Coaches Conduct / bylaws, or undertake any activity that is deemed by OIPRD not to be in the best interest of our youth athletes or the organization programs, I will be subject to suspension and removal by OIPRD.

Signature:

Date:

Full Legal Name:

Date of Birth:

*Please attach a photocopy of your driver's license to this application*

# OIPRD VOLUNTEER COACH APPLICATION

## COACHES CODE OF CONDUCT

*Please initial to the left of each statement to acknowledge receipt, review and intent to comply.*

*As a Coach I will:*

- . \_\_\_\_ 1) always be fair, firm and consistent.
- . \_\_\_\_ 2) promote a positive attitude and lead by example.
- . \_\_\_\_ 3) follow the rules of the sport and teach the basic fundamentals of football at a level and a pace that incurs the best possible environment for learning.
- . \_\_\_\_ 4) not argue with parents or officials, and will always demonstrate good sportsmanship.
- . \_\_\_\_ 5) listen to their players concerns and try to help them any way they can.
- . \_\_\_\_ 6) do the best they can to ensure each athlete is both physically and mentally ready for whatever task is asked of them.
- . \_\_\_\_ 7) strictly adhere to the policies and procedures of OIPRD and associated Leagues, and set a proper example with their actions for everyone to follow.
- . \_\_\_\_ 8) stress teamwork and respect each and every athlete.
- . \_\_\_\_ 9) not allow anyone who has not filed a background investigation form with OIPRD to coach or be left unattended with any minor.
- . \_\_\_\_ 10) allow each athlete the opportunity to compete and excel.



# OIPRD VOLUNTEER COACH APPLICATION

To be completed by OIPRD Personnel:

Applicant's Name and DOB: \_\_\_\_\_

Application Received: (date)\_\_\_\_\_ by Employee\_\_\_\_\_ Attached?\_\_\_

Completed Concussion: (date)\_\_\_\_\_ by Employee\_\_\_\_\_ Attached?\_\_\_

Completed S.C.A.C: (date)\_\_\_\_\_ by Employee\_\_\_\_\_ Attached?\_\_\_

Completed PCA: (date)\_\_\_\_\_ by Employee\_\_\_\_\_ Attached?\_\_\_

Completed USAFB H.U.: (date)\_\_\_\_\_ by Employee\_\_\_\_\_ Attached?\_\_\_

Completed FirstAid/CPR: (date)\_\_\_\_\_ by Employee\_\_\_\_\_ Attached?\_\_\_

Completed Conduct Rcpt: (date)\_\_\_\_\_ by Employee\_\_\_\_\_ Attached?\_\_\_

Passed Background: (date)\_\_\_\_\_ by Employee\_\_\_\_\_ Attached?\_\_\_

All application items complete and passed: (date)\_\_\_ Employee\_\_\_\_\_

Notes:



*Agency/Organization Name Here*  
**National Background Screening Consent Form**

Applicant's **Legal** Name (printed)

\_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Applicant's Address

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I, \_\_\_\_\_, authorize and give consent for the above named organization to obtain information regarding myself. This includes the following:

- Local & National Criminal background records/information
- All 50 State Sex Offender Registries
- Full Address Trace
- Social Security Verification

I the undersigned, authorize this information to be obtained either in writing or via telephone in connection with my application. Any person, firm or organization providing information or records in accordance with this authorization is released from any and all claims of liability for compliance. Such information will be held in confidence in accordance with the organization's guidelines.

By signing this document, I am providing the above named Organization my consent for an initial background check as well as any subsequent background checks deemed necessary throughout the length of my volunteer assignment with this Organization.

Print Name:

\_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_