HEAD COACH

Only Head Coach may approach/confer with the Officials

VOLUNTEER APPLICATION ACCEPTANCE POLICY

Applicant retains copy of this policy

It is the policy of the Peach County Board of Commissioners that all coaches, assistant coaches, and all other volunteers that the Peach County Recreation Department recognized as part of an event or program, will fill out a Recreation Department "Consent to Conduct Background Check" form. A background check will be conducted on all volunteers. Reasons for denial are:

- 1. Falsifying consent form.
- 2. Arrest or conviction for crime involving moral turpitude.
- Recent arrest or conviction for any crime that would be detrimental to the well being of minor or adult participating in a Peach County Recreation Department event.
- 4. Although volunteer coaches for the Peach County Recreation Department will <u>not</u> be required to have a drug screening prior to providing service to the department, they will, however, be required to sign for receiving a copy of the Peach County Substance Abuse Policy and will abide by the regulations contained therein. Volunteer coaches are <u>not</u> safety sensitive workers and will, therefore, <u>not</u> be subject to random testing.



PEACH COUNTY PARKS & RECREATION DEPARTMENT HEAD COACH APPLICATION



SPORT:	DATE:			
NAME:				_AGE:
ADDRESS:	Ema	nil		
CITY:	ZIP CODE:		COUNT	Y:
PHONE: (Home)	(Work)		(Beeper or Cell):_	
CHILD'S NAME:	COACH HIS/HER TEAM		_CHILD'S AGE:	
Are you a returning HEAD Coach? If yes, do you wish to return to the sa If yes, what division (age group)? _ Are you a returning ASSISTANT Coacl If yes, what division (age group) did y	Yes or No ame age group?	Yes or	No 	
Are you a NEW COACH? Yes What division (age group) are you re	or No questing? 1 st Choice 2 nd Choic	:: :e:		_
Do you have any prior experience in c If yes, list experience:				
Have you coached any other sport(s) of the sport (s) of the sport (s):				
Place of Employment:				
Supervisor:		Phor	ne:	
VOLUNTEERS WHO WORK WITH CHILDRI I understand that this is an APPLICATION ON CHECK may be conducted. If chosen to coac any time. ONLY HEAD COACHES ASSISTANT COACHES V	ILY and does not automatica h, I understand that under ce S MAY APPROAC	lly entitle me rtain condition	to coach. I also und ns, I can be relieved of FER WITH OI	lerstand a BACKGOUND of my coaching duties at
OFFICIAL USE ONLY Team Assigned: Date: Approved by:	i			

CONSENT TO CONDUCT BACKGROUND CHECK

	(First)	(Middle)		(Last)			
ADDRESS:				· · · · · · · · · · · · · · · · · · ·			
CITY:		STATE:	ZIP CODE:	The state of the s			
HOME PHONE: DATE OF BIRTH:		WORK PH	WORK PHONE:				
		SOCIAL SECURITY #:					
DRIVER'S	LICENSE #:	STATE:	EXPIRATION:				
MALE or	· FEMALE (Circle	One) U.S. CITIZEN: YE	SNORACE:				
Recreation Dep ever been conv	partment programs. This bac icted of a crime or have a cri fy the <u>NO I have not been</u> or	, by execution of this doc round check regarding my qualifickground check includes, but is n iminal record. YES I have been convicted of o	ot limited to, a records che	eck to determine whether I ha			
(Yes or No)	1. Simple Battery, where	e the victim is a minor or adult.					
(Yes or No)	2. Aggravated Battery, where the victim is a minor or adult.						
(Yes or No)	3. Cruelty to children.	. Cruelty to children.					
(Yes or No)	4. Contributing to the delinquency of a minor.						
(Yes or No)	5. Any sexual offense.						
(Yes or No)	6. Violation of any Controlled Substance Act.						
(Yes or No)	7. Alcohol related violations.						
(Yes or No)	8. Murder or Felony Mu	ırder.					
(Yes or No)	9. Criminal attempt to co	ommit any above named offense	•				
(Yes or No)	10. Any other crime that	bears upon my fitness to have re	esponsibility for safety and	wellbeing of children.			
choose to deny hold the Peach invasion of priv	me unsupervised access to a County Parks & Recreation vacy, or any other claim base	nty Parks & Recreation Departm a child or children pending the co Department and/or the county of ed upon good faith action taken p ECKS ARE KEPT CONFIDEN	ompletion of the backgrour f Peach harmless regarding oursuant to the provisions of	nd check; and I further agree t any liability for defamation,			
APPLICANT [®]	S SIGNATURE:			D. 4			
				Date			
Witness							



FOR HEAD COACHES:

I understand that I will attend the following:

{Please init	tial each event below}	
	Tryouts (Mandatory)	
	Drafts (Mandatory)	
Employment of the state of the	Coaches Meeting (Mandatory)	
~	_Saturday Coaches Clinic Of Onlin (\$20 Fee NAYS)	ne Coaches Certification (Mandatory)
 Sign		Date

Thank you for your commitment,

Damian Smith
Athletic Director
Peach County Recreation Department
478-825-3334
damian-smith@peachcounty.net