

Rock River United

Background Check Application

I, (print name) _____, certify that all information provided in this application and any attachments is true and complete. I understand that any false information or omission may disqualify me from further consideration as a coach, or, if I am given the position, may result in my dismissal from coaching if discovered at a later date.

I authorize Rock River United to request investigative reports from consumer, law enforcement, and other agencies. These reports may include information as to my character, reputation, personal characteristics, criminal offenses, and mode of living obtained from interviews with neighbors, friends, former employers, schools, and others. I understand I have a right to make a written request within a reasonable time for the disclosure of the name and address of the reporting agencies so that I may obtain a complete disclosure of the nature and scope of the investigation.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a selection decision. I release such persons and organizations from any legal liability in making such statements. I also understand that a physical, drug test, and fingerprinting may be required.

I understand that this application does not create a contract of employment nor guarantee employment for any definite period of time. If selected as a coach, I understand that I serve at the will of the administration and that my position may be terminated at any time, with or without cause and with or without notice.

I authorize investigation of all statements contained in my application as may be necessary in arriving at determining a candidate for the coaching position.

I voluntarily provide the following information to enable the above-described actions to be undertaken; and I have read, understand, and consent by my signature to these statements.

Signature: _____ Date: _____

Social Security Number: _____ Date of Birth: _____

Driver's License Number: _____ State: _____

Criminal Background Check Form

Name: _____ Daytime Telephone: _____

Address: _____

Coaching Position: _____

Have you at any time ever:

Been arrested for any reason? Yes No

Been convicted of, or pleaded guilty or no contest to, any crime? Yes No

Engaged in, or been accused of, any child molestation, exploitation, or abuse? Yes No

Are you aware of:

Having any traits or tendencies that could pose any threat to children or others? Yes No

Any reason why you should not work with children or others? Yes No

If the answer to any of these questions is "yes," please explain in detail: _____

Verification and Release:

I recognize that Rock River United is relying on the accuracy of the information I provide on the Background Form. Accordingly, I attest and affirm that the information I have provided is absolutely true and correct.

I voluntarily release the organization and any such person or entity listed on the Background Form from liability involving the communication of information relating to the background or qualifications.

I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.

I agree to abide by all policies and procedures of the organization, and to protect the health and safety of the children assigned to my care of supervision at all times.

Signature: _____

Date: _____

Social Security Number: _____

Date of Birth: _____