



Team Staff Member Application

PERSONAL INFORMATION

First Name: _____ Middle Initial: _____ Last Name: _____

Address: _____ Gender: Male Female

City: _____ State: _____ Zip: _____ 21 or older? No Yes

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Email Address: _____ Driver's License #: _____

How many years have you been involved with MVLGAS? _____

I am interested in volunteering for the following team staff position(s):

Manager (Female only) Head Coach Assistant Coach Chaperone (Female only)

Division(s): 6U 8U 10U 12U 14U/16U

EXPERIENCE

No Yes Were you a registered Mountain View – Los Altos Girls Softball team staff volunteer for last season?

No Yes Have you ever been registered as a volunteer for a girls softball league?

Years of Experience: Coaching _____ Managing _____ Chaperoning _____

No Yes Recreational (Division(s) _____) No Yes Travel, (Division(s) _____)

No Yes Were you ACE certified for last season? If so, which level: _____

If yes, what email address did you use to login for ACE? _____

No Yes Have you been an Umpire or Referee? If so, which sport and level: _____

No Yes Do you have experience as a volunteer or employee with children in an organized youth program other than softball? If so, please describe:

Special professional training, skills, hobbies: _____

Special certifications (e.g. CPR, medical, etc.): _____

List any comments that would help the Board evaluate your suitability for a team staff position:

BACKGROUND

No Yes Have you ever been reprimanded, suspended, relieved, or voluntarily resigned from Coach's or Manager's duties, or been refused participation in any youth program?

No Yes Have you ever been convicted of, or pled guilty or *nolo contendere* to any criminal offense in any court of law, in the U.S. or elsewhere?

No Yes Has any court deferred further proceedings without entering a finding of guilty, or placed you on probation?



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- No Yes Have you ever been registered for any offense under 290CPC or equivalent penal code, or does a report accusing you of child abuse appear on the Child Abuse Index maintained by the California Department of Justice?
- No Yes Has your driver's license ever been suspended or revoked?
- No Yes Is there any fact or circumstance involving you or your background that would call into question you being entrusted with the supervision, guidance and care of young people?

Note: A yes answer to one or more of the above questions will not necessarily disqualify you as a volunteer. If you have answered yes to one or more of the above questions, please provide additional details below:

Please list two personal references (not relatives) that may be contacted for character verification:

Name: _____ Phone: _____ Email: _____

Name: _____ Phone: _____ Email: _____

PLEDGE

- No Yes I am available to attend practices and games (including occasional local travel to Interleague games for 12U and up divisions). I expect to be available _____ % of the time. Known conflicts include:
- _____
- No Yes I will attend and complete all League-designated training sessions for the volunteer position I am applying for. This may include online training such as ACE (typically Coaches and Managers) and league-provided clinics
- No Yes I agree to abide by the Mountain View – Los Altos Girls Softball League Parent/Guardian Code of Conduct in my words and actions and agree to hold my players, their parents, and those around me accountable to these same standards of conduct
- No Yes I agree to abide by the Mountain View – Los Altos Girls Softball League Team Staff Code of Conduct in my words and actions

I hereby pledge to provide positive support, care, and encouragement for all children participating in the Mountain View - Los Altos Girls Softball League. By signing below I certify that the above information is true and correct and that I will abide by the governing rules and regulations of the Mountain View - Los Altos Girls Softball League. I agree to allow an authorized representative of the League contact any personal references I have listed on this application and to conduct any background checks they may feel are necessary, which may include a review of sex offender registries, child abuse, and criminal history records, to verify the information I have given on this application. I further understand that the selection of team staff is made by the League's Board of Directors and all decisions are final.

Print Name of Team Staff Applicant

Signature of Team Staff Applicant

Date

AMATEUR SOFTBALL ASSOCIATION - NOTICE OF BACKGROUND CHECK AND CONSENT

IMPORTANT –PLEASE READ CAREFULLY BEFORE SIGNING BELOW

The Amateur Softball Association of America and/or its local associations (collectively, “ASA”) are volunteer driven not-for-profit organizations. One of ASA’s objectives is to promote proper safeguards in accordance with the spirit of true sportsmanship and establish principles for ethical behavior in the sport of softball. You are already working with ASA or you have expressed an interest in becoming a volunteer with ASA. Consistent with promoting wholesome and safe competition, ASA may perform criminal background and/or motor vehicle record (or “driving record”) checks on you pursuant to your written consent and instructions below. Accordingly, ASA may obtain reports on your criminal background and/or driving history from a “consumer reporting agency.” The report may include information gathered from county, federal, statewide or other record searches, as guided by personal identifier information obtained through a Social Security Number trace, name address or other information. You may refuse to provide your consent to a background check, however, your refusal may affect your ability to participate in ASA programs. NOTE: Conducting a Social Security Trace does NOT access the subject’s credit history nor affects the subject’s credit score or credit rating. ASA has contracted with ChoicePoint, a consumer reporting agency, to provide the consumer reports. ChoicePoint may be contacted by mail at ChoicePoint, 1000 Alderman Drive, Alpharetta, GA 30005 or by telephone at 800-845-6004.

The consumer reports may contain information bearing on your character, general reputation, personal characteristics, and mode of living. Please note that ASA does not discriminate on the basis of race, color, creed, religion, sex, sexual orientation, national origin or ancestry. The types of information that may be obtained include but are not limited to social security number verification, sex offender registry checks, criminal records checks, inmate records searches, motor vehicle records, and court records checks. The information contained in these consumer reports may be obtained by ChoicePoint from public record sources. The consumer reports will not include credit record checks. The nature and scope of the consumer reports are described above. Nonetheless, you are entitled to request a complete and accurate disclosure of the nature and scope of such reports by submitting a written request to ChoicePoint at the address listed above. Additional notices for applicants in California, New York, Minnesota, and Oklahoma are attached to this form.

By signing below you are authorizing and instructing ASA to immediately obtain criminal background and driving record reports from a third party (utilizing a social security number trace or other information such as your name, address or driver’s license number) as ASA deems necessary and appropriate. Moreover, you are allowing and instructing ASA to obtain those reports from a third party on an ongoing basis without any additional notice or consent for as long as you are a volunteer or otherwise associated with ASA. You may revoke this consent at any time by providing ASA with a written notice of revocation.

AUTHORIZATION, CONSENT AND INSTRUCTION

I acknowledge receipt of the Notice of Background Check and certify that I have read and understand that notice. I hereby voluntarily consent to ASA obtaining a background check on me and I authorize and instruct ASA to obtain criminal background and/or driving record reports from a third party (utilizing a social security number trace or other information such as my name, address or driver’s license number) as ASA deems necessary and appropriate. This authorization and instruction will take immediate effect when I sign below, and will last throughout the duration of my involvement with ASA. Accordingly, ASA may obtain additional criminal background and/or driving record reports from a third party on an ongoing basis (i.e. annually or semi-annually) throughout my association with ASA without any further notice or additional warning. To this end, I hereby authorize without reservation any law enforcement agency, administrator, local, state or federal agency, information service bureau and/or the Social Security Administration to furnish any and all background information (including criminal history and/or driving records but not credit history) requested by any third party "consumer reporting agency", another outside organization acting on behalf of ASA, and/or ASA itself. I understand that if ASA makes a preliminary determination not to accept my application or to revoke my affiliation based on information contained in a consumer report, I will be notified and provided an opportunity to respond. I agree that a facsimile (“fax”) or photographic copy of this Authorization and Instruction shall be as valid as the original.

Include a Legible Photo Copy of your Driver’s License Attached to this document.

SSN is not yet needed but may be requested and required at a later time

Printed Name (Full Legal Name)

Social Security Number

Signature

Date

Date of Birth (for identification purposes only)

All other names or aliases used within the past ten years

Driver’s License No. and State

Residence, Street Address

Prior Residence Address within last 5 years (Street Address)

Residence, City, State and Zip

Prior Residence Address within last 5 years (City, State, Zip)

ADDITIONAL NOTICES TO CALIFORNIA, MINNESOTA, OKLAHOMA, AND NEW YORK APPLICANTS

California

Under California law, the consumer reports described above that we will procure on you are defined as investigative consumer reports. These reports will be procured in connection with your application to serve as a volunteer, and additional reports may be procured at any time during your service as a volunteer in order to evaluate your continued suitability for volunteer service. The reports may include information on your character, general reputation, personal characteristics, and mode of living.

Under section 1786.22 of the California Civil Code, you may inspect the file maintained on you by ChoicePoint, during normal business hours and with proper identification. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication, by appearing at ChoicePoint's offices in person, during normal business hours and on reasonable notice, or by certified mail upon making a written request. You may also receive a summary of the information contained in this file by telephone. ChoicePoint will provide trained personnel to explain any information furnished to you and will provide a written explanation of any coded information. This written explanation will be provided whenever a file is provided to you for visual inspection. If you appear in person, you may be accompanied by one other person of your choosing, who must furnish reasonable identification.

For Applicants in California, Minnesota, and Oklahoma Only

You have the right to request a free copy of any report procured on you. If you would like to receive a copy of the background check information obtained on you please indicate by checking the following box and signing below.

Yes, I would like to be provided with a copy of the background check information and request that you forward the information to me at the following address:

Street Address

City, State, Zip

Signature

Date

***In the event you elect to receive a copy of your information, you are required (on an ongoing basis) to keep ASA informed of any address changes so that your background check information is not forwarded to an old address.

New York

As explained above, a consumer report will be requested in connection with your application, and additional consumer reports may be requested during the course of your service with us. You have the right, upon request, to be informed whether or not a consumer report was requested and, if a consumer report was request, of the name and address of the consumer reporting agency that furnished the report.

My signature below indicates that I have read, understand, and accept the accompanying disclosures and notices.

Signature