|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applying For SEASON       / YEAR | | | | | | | | | | | | | | | | | | |
| Head Coach | | | | 6U  8U  10U  12U  15U | | | | | | | | | Would like to coach with: | | | | | |
| Assistant Coach | | | | 6U  8U  10U  12U  15U | | | | | | | | |  | | | | | |
| Applicant Information | | | | | | | | | | | | | | | | | | |
| Name: | | |  | | | | | | | | Date of Birth: | | | |  | | | |
| Address: | | |  | | | | | | | | Driver’s License: | | | |  | | | |
| Phone: | | |  | | | | | | | | Employer: | | | |  | | | |
| Email: | | |  | | | | | | | | Occupation: | | | |  | | | |
| Baseball Coaching Experience | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | Years coached with ECB | | | | |
|  | | | | | | | | | | | | | |  | | | | |
| Other Coaching Experience | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| Coaching References (Coaches with whom you have been directly associated.): | | | | | | | | | | | | | | | | | | |
| Name: |  | | | | | | | | Phone: | |  | | | | Years Known: | | |  |
| Name: |  | | | | | | | | Phone: | |  | | | | Years Known: | | |  |
| Character References (No Relatives) | | | | | | | | | | | | | | | | | | |
| Name: |  | | | | | | | | Phone: | |  | | | | Years Known: | | |  |
| Name: |  | | | | | | | | Phone: | |  | | | | Years Known: | | |  |
| Criminal History | | | | | | | | | | | | | | | | | | |
| Have you ever been convicted of a felony? | | | | | | | | No  Yes | | | | If yes, Date: | | | |  | | |
| Have you ever been convicted of any crime involving a child? | | | | | | | | | | | | | | | | | No  Yes | |
| Other than the above, is there any fact or circumstance involving your background that would call into question you being trusted with the supervision, guidance and care of minor children? | | | | | | | | | | | | | | | | | No  Yes | |
| If yes, explain: | | | | | | | | | | | | | | | | | | |
| Understanding and Agreement | | | | | | | | | | | | | | | | | | |
| If approved as and ECB Coach, I understand that I will be required to attend scheduled clinic’s and coach’s meetings. I further agree that, if approved, I am responsible for knowing, understanding, communicating, and abiding by the ECB “Coach’s Code of Conduct” as set forth in the ECB organization. I understand that if approved as a coach, that any violation of the code of ethics will be cause for removal by the ECB Board. | | | | | | | | | | | | | | | | | | |
| Signature: | |  | | | | | | | | | | | | | | | | |
| The information I have provided may be verified, if necessary, by obtaining a background check and/or contacting persons or organizations that may have information concerning me. I hereby release and agree to hold harmless any person or organization that provides information. I also agree to hold harmless East Chatham Baseball, the Board of Directors and any agents thereof and any person or organization that provides information and/or is involved in the decision making process. | | | | | | | | | | | | | | | | | | |
| Signature: | |  | | | | | | | | | | | | | | | | |
| In signing this application, I affirm that the information I have given is true and correct. I understand that the ECB Board of Directors has the right to approve or disapprove any applicant based on the information provided and/or collected on behalf of the applicant and/or if the coaching positions have already been filled via the voting process. | | | | | | | | | | | | | | | | | | |
| Signature: | |  | | | | | | | | | | | | | | | | |
| To Be Completed by ECB Board | | | | | | | | | | | | | | | | | | |
| Background Check Completed | | | | | | | Yes  No | | | If no, indicate why : | | | | | | | | |
| Comments regarding coaching/character references and/or past coaching experiences: | | | | | | | | | | | | | | | | | | |
| Approved | | Yes  No | | | | If no, indicate why : | | | | | | | | | | | | |
| Positions Approved: | | | | |  | | | | | | | Date Approved: | | | | |  | |