

# Silicon Valley Girls Softball League Manager/Coach Application

Position Being Applied For:       Manager       Coach      Male / Female

(Please circle one)

Name: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone #: (\_\_\_\_) \_\_\_\_\_ Work #: (\_\_\_\_) \_\_\_\_\_ Emergency #: (\_\_\_\_) \_\_\_\_\_

Daughter's Name: \_\_\_\_\_ Division being applied for: \_\_\_\_\_

YES  NO Have you previously held a Manager/Coach position with S.V.G.S.L. (previous Little League program)? If YES, please give details\*: \_\_\_\_\_

YES  NO Have you previously held a Manager/Coach position with any other youth recreation organization? If YES, please give details\*: \_\_\_\_\_

YES  NO Have you ever been suspended from any youth program? If YES, please give details\*: \_\_\_\_\_

YES  NO Have you ever been registered for any offense under 290 C.P.C. (Sex Crimes) in California, or equivalent penal code in another state?

YES  NO Have you ever been convicted of any "drug crimes" or "crimes of violence"? (misdemeanor or felony)

YES  NO Do you plan to Manage/Coach with another person? If YES, please give details: \_\_\_\_\_

Manager/Coach Name: \_\_\_\_\_ Daughter's name: \_\_\_\_\_

**NOTE:** The person listed above is also required to complete this form, and is also subject to Board approval.

**Please read and initial the following statements:**

\_\_\_\_\_ I understand that this appointment is for the duration of the current season, unless revoked sooner by the Board of Directors. I will comply with the Administrative Rules and Regulations of S.V.G.S.L. for the current year. I understand that it is forbidden to use profanity, alcohol, or illegal drugs during the regular league games, practice sessions, or during league activities.

\_\_\_\_\_ I understand that I will be subject to a background investigation and/or fingerprint verification to determine my suitability for this sensitive community position and I hereby approve of such action (C.P.C. #11105-2, or equivalent penal code).

\_\_\_\_\_ I will attend the **mandatory** Manager/Coach meeting(s). I understand and take responsibility for knowing the S.V.G.S.L. rules. I will be a positive role model during the season.

\_\_\_\_\_ In association with S.V.G.S.L. for the current year activities, I consent to and authorize the reproduction of any and all photographs taken of me by any photo medium, including videotape, for normal program purposes, including publishing the photograph on the S.V.G.S.L. website.

**References:**

Listed below are three personal references who can attest to my ability to act in a role of leadership with young people. I understand that the League President or Division Director will contact these references to discuss my request to volunteer (Note: If possible, please include people who have observed you in situations similar to SVGSL).

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Your Signature: \_\_\_\_\_ Date: \_\_\_\_\_

By signing this form, the individual certifies that all above is true and correct.

Email address: \_\_\_\_\_

\* Please use the back of this form if more room is needed for details.

S.V.G.S.L. requires all personnel to have this form on file with the Board of Directors. The Board is required to utilize this form for all managers and coaches. The Board should select the best available adult with leadership qualities for positions in the league to benefit all S.V.G.S.L. participants. This completed form is a viable part of the Board's screening process.

**For Board Of Directors Use Only**

This application was reviewed by the S.V.G.S.L. Board of Directors at a meeting held on \_\_\_\_\_ (date).

**Action Taken:**       Accepted     Rejected     Filed     Postponed      Reason: \_\_\_\_\_

President's Signature: \_\_\_\_\_ VP Signature: \_\_\_\_\_