Pop Warner Little Scholars, Inc.

2019 Official Volunteer Application (Complete BOTH Pages) Do NOT use forms from previous years.

egal Name:	e: Date:			Special professional training, skills, hobbies:		
rior/Maiden Names or A	liases:	Date.		Special professional training, skins, hobbies.		
Address:				Community affiliations (Clubs, Service Organizations, etc.):		
Telephone:	Er	nail:	·		_	
City:	S	tate:	Zip:	Previous/current volunteer experience (e.g. baseball/softball and years):		
Mailing Address (if differe	ent):					
				Do you have children in the program?	YES	NO
Previous states resided in	the past 5 years:			If yes, at what level?		
Date of Birth:				Special Certification (i.e. CPR, Medical, etc.):		
(mm / dd / yyyy)			Have you ever been charged with or convicted of a felony?	YES	NO
Social Security Number:	-			If yes, provide your current legal status (parole, etc.)		
Occupation:				Have you ever been convicted of any crime involving or aga	ainst a minor?	
Employer:				<u> </u>	YES	NO
Address:				Have you ever plead guilty to, been convicted of or involved		
Do you have a valid driver	r's license?	YES	NO	Have you ever been refused participation in any other youth	YES	NO
•	i s licerise :				. •	NO
Driver's License#:			State:	If YES to ANY of the above, explain:	YES	NO
which of the followin	g would you like to particip	ate? ("X" one	or more.)			
_eague Official:	Head Coach:	Board Me	mber:	Equipment Manager.	Assist. Coach:	
Team Mom:	Coach Trainee:	Trainer:		Student Demo:		
Other:						

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	PLEASE NOTE: A copy of a valid government-issued phot	o identification must be attached to this ap	oplication.
Name:	Nature of Relationship:		Phone #:
made any false statements or material misrepreser database records including but not limited to sex o conditional upon the league receiving no inappropri	ed on this application is true and complete to the fullest extent of tations, written or verbal. As a condition of volunteering, I hereb ffender registries, child abuse and criminal history records in comiate information on my background. I hereby release and agree to person or organization that may provide such information.	y grant permission to Pop Warner to conduct upliance with Pop Warner's child protection po	t a background check on me, which may include a review of slicy. I understand and agree that, if appointed, my position
and removal by the Board of Directors for any and	ntments, Pop Warner is not obligated to appoint me to a voluntee all violations of Pop Warner policies or principles. Furthermore, I such contact information for communications and promotions dur	hereby attest that all contact information provide	
Warner Little Scholars, Inc. National Office in L	at any and all civil disputes by and between myself, Pop Wa anghorne, PA in accordance with Pennsylvania law under nd between myself, Pop Warner and any and all affiliated p ect.	the guidelines and rules of the American	Arbitration Association. I hereby agree that this bindin
Applicar	nt Signature		Date
Applicant Name (Print or Type):			
NOTE: Pop Warner Little Scholars, Inc.will not disc	riminate against any person on the basis of race, creed, color, nati	onal origin, marital status, gender, sexual orien	ntation or disability.
	legal name of the individual who performed the background	nd check on the applicant and name of th	e local organization.
Background check completed by <u>Association</u> or	officer:		
Background check completed by <u>League</u> office	er:		
completed by:	Date Com	pleted:	
	System(s) used for background check (minimum of one must have "X"):	
Online multistate database: St (Choicepoint, etc.)	ate/Federal Criminal History Records: F	EDERAL Sex Offender Registry	Other (please explain):
**NO	FE: A State Sex Offender Registry check alone is NOT sufficient to	o comply with Article 21 and MUST be	supplemented by one or more of the above.
LEAGUE	S: You must maintain copies of background check results a	at the league level for the duration of the vo	plunteer's service.