

**WCSL COACH / REFEREE / VOLUNTEER APPLICATION AND CRIMINAL  
BACKGROUND CONSENT FORM**

Criminal Background Checks: The Wilson County Soccer League (WCSL) has a great deal of concern about the safety and abuse of children. We will not tolerate the abuse of any child. We are aware that some people apply for positions in the youth services field because they are interested in children sexually. We make an active effort to prevent child sexual abuse in our program. We attempt to screen out molesters through a careful background check. Your association with the WCSL as a volunteer is contingent on the results of a background check, including a criminal background history records check and execution of a certification/consent for criminal background check/authorization/waiver/release/indemnity.

I certify that all of my statements on this application, the information provided, and attachments hereto, are true and complete to the best of my knowledge. I also certify that I have not withheld any information that would affect my application unfavorably, if disclosed. I understand that any omission of facts or misrepresentation will result in my elimination from consideration for any volunteer or staff position with WCSL, following acceptance of service, may be cause for the immediate termination of my relationship with WCSL. I further certify that I understand the intent of WCSL is to deny a position to anyone convicted of a crime of violence or a crime against another person.

I acknowledge and hereby give my unconditional permission to WCSL to, inquire as deemed necessary into my prior background, including criminal background checks which may contain arrest and conviction data, plea bargains and deferred adjudications and delinquent conduct committed as a juvenile. I give my permission for WCSL to obtain information relating to my criminal history (federal and state) from a background check vendor and/or licensed private investigator. I understand that this information will be used, in part, to determine my eligibility as a volunteer with this organization. I also understand that as long as I remain a volunteer here, the background history check may be repeated at any time. I understand that a procedure is available for clarification and that I will have an opportunity to review the criminal history if I dispute the record as received.

I, the undersigned, do, for myself, my heirs, executors, administrators and representatives, do hereby remise, release and forever discharge and agree to indemnify and hold harmless any and involved background check vender and/or licensed private investigator, Wilson County Soccer League (WCSL) and each of their officers, directors, commissioners, volunteers, representatives, as well as any third parties, if any, that WCSL, directly or indirectly, regarding may application to, or future services with WCSL from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever, and any and all related attorney's fees, court costs, and other expenses resulting from the investigation of my background in connection with my application to become a volunteer.

I further agree to conform to the rules, regulations, and policies of WCSL. Only specifically designated WCSL staff will review criminal history records and the findings of this investigative action will be held in confidence. WCSL will maintain copies of criminal histories for a period of thirty days before being destroyed by shredding. Background Check Applications are destroyed once the volunteer is cleared to participate or after an appeal has been heard and rules an individual ineligible, or when the appeal time has elapsed. I understand and agree that WCSL may, in their sole discretion, decline to accept my application for volunteer services with or without cause.

I acknowledge that I have read and fully understand the above certification / consent for criminal background check / authorization / waiver / release / indemnity, and that I accept and sign this form voluntarily.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

**(If you are under 17 years of age, your parent/guardian must co-sign with you in the signature block).**

Parent/Guardian's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## WCSL COACH / REFEREE / VOLUNTER APPLICATION AND CRIMINAL BACKGROUND CONSENT FORM

Position (Check all that apply)

Coach     
  Asst. Coach     
  Referee     
  Volunteer     
  Staff

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
 Date of Birth: \_\_\_\_\_ (MM/DD/YYYY)      SSN#: \_\_\_\_\_ (Required)  
 Maiden Name: \_\_\_\_\_ Driver's License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_  
 Other Names or Alias Used: \_\_\_\_\_  
 Current Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 County: \_\_\_\_\_ How long at this address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 U.S. Citizen:    Yes     No     If No, list county of Citizenship and Visa/Work Permit Status: \_\_\_\_\_  
 If less than 5 years at current address, include previous address below.  
 1st Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 2nd Previous Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

1. Have you ever been convicted of a felony or misdemeanor?      Yes     No
2. Has any court ever received a plea of guilty or nolo contendere from you for any offense?      Yes     No
3. Has any court deferred further proceedings without entering a finding of guilty, or placed you on probation?      Yes     No
4. Have you ever voluntarily resigned, been removed from a position of authority, or arrested for moral turpitude or dishonesty?      Yes     No

If you answered YES to any of the above, please provide details below or on another sheet to this application. Affirmative answers and/or conviction of a crime is not an automatic bar to consideration. The nature and date of offense, and its relationship to the position for which you are applying will be considered.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

***I certify that all of my statements on this application, the information provided, and the attachments hereto, are true and completed to the best of my knowledge.***

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Print Name: \_\_\_\_\_