

Kimberly Baseball Organization Volunteer Coach – Background Check

Name: _____
Last
First
Middle

Age interested in coaching _____ / Are you CPR certified _____

Drivers License number _____

Social Security # (Optional :) _____

Other Name(s) used _____ Date of Birth _____ Sex _____
 (Or Maiden Name)

Home Address: _____

Number & Street
City
State
Zip

Home Telephone: () _____ Work Phone: () _____

Last 5 years Previous Addresses

Number & Street
City
State
Zip

Number & Street
City
State
Zip

Please list ALL instances in which you were convicted as an adult for crimes (misdemeanors or felonies), ordinance violations, traffic violations, and the like. Also, please list all criminal charges (misdemeanors or felonies) **currently pending** against you. Failure to include all information requested under this section may result in denial of your request to volunteer.

Check here if not applicable _____

Approximate dates may be listed: (you may attach an additional sheet if necessary)

Date	Location	Charge	Court	Disposition of Case

READ CAREFULLY BEFORE SIGNING

I certify that all answers to the above questions are true and complete and authorize the Kimberly Baseball Organization to use the information I have provided. I understand that falsification of, or omissions from this form may result in disqualification or removal from a coaching position.

Printed Name _____

Signature _____ Date _____

This information is subject to a background check