

Volleyball Coach Application

Name:		
Email Address:		
Contact Phone Number:		
What local church do you atte	nd?	
Have you coached with Centra	Sports before? Yes {. } No	{. } If yes, what year?
Division interested in coaching 1-3Grade { } 4-6 Grac		
What is/are the names of your	children you ARE coachin	g and what division are they in?
Name	Division	Head or Assistant (Circle)
		_ H or A
		_ H or A
		_ H or A
Names of your children partici	pating that you are N <i>OT</i> co	paching?
Name	Division	

Preferred Practice day? M Tu Th

Preferred Practice time? 5:30 6:30

We can only practice two teams per court per hour. Only 4 teams per division can practice per night There is one 1-3 grade court and one 4-6 grade court available per hour with two teams on each. Day and time preference is first come first served basis.

PLEASE DESCRIBE IN DETAIL YOUR SALVATION EXPERIENCE AND WHAT YOUR RELATIONSHIP WITH JESUS CHRIST IS LIKE TODAY:



Criminal History Background Check Information Form

In connection with my application for employment or to serve as a volunteer with Central Baptist Church, College Station, TX ("Client'), I understand that a criminal history and SSN verification report will be requested by Client for employment or volunteer purposes, whichever is applicable, from Protect My Ministry, Inc., ("Protect My Ministry"), a consumer reporting agency as defined by the Fair Credit Reporting Act. These reports may include information as to my character, general reputation, personal characteristics or mode of living, whichever are applicable. They may involve interviews with sources such as my neighbors, friends or associates. The re-port may also contain information about me relating to my criminal history, credit his- tory, driving and/or motor vehicle records, social security number verification, verification of education or employment history, worker's compensation (only after a conditional job offer) or other background checks. Such reports may be obtained at any time after receipt of this Disclosure and Authorization and if I am hired or serve as a volunteer, whichever is applicable, throughout the course of my employment or volunteer service, as permitted by law and unless revoked by me in writing. I under- stand that I have the right, upon written request made within a reasonable amount time after the receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report to Protect My Ministry, Inc., 14499 N. Dale Mabry Hwy., Suite 201 South, Tampa, FL 33618 or 1-800-319-5581. For information about Protect My Ministry's privacy practices, see www.protectmyministry.com.

Acknowledgement and Authorization

By signing below, I voluntarily and knowingly authorize Client or its authorized agents to obtain or prepare consumer or investigative consumer reports about me. I under- stand that the results of the criminal history check could contain information pre- sumed to be expunged. I also understand that this information will be used, in part, to determine my eligibility for employment/volunteer position with Central Baptist Church. I understand that I will have an opportunity to review the criminal history as received by Central Baptist Church and that a procedure is available for clarification if I dispute the record as received.

Applicant Signature	Date	
Applicant Full Legal Name	For Office Use Only:	
	Date Completed:	
	Required Staff Approval? YES NO	
	HR Manager Initials: Date:	



Criminal History Background Check Information Form

Please print all information below. This completed form will be secured in Human Resources until background check is complete. Upon completion, this form is promptly shredded. If you have any questions, please contact Central

Baptist Church Human Resources. I am applying for: (circle one) Employment Volunteer Which Ministry(ies) will you be serving?: Full Name: Please print First Name Middle Name Last Name Former names (if applicable): **Social Security Number:** Date of Birth: Mo/Day/Year Circle Gender: Female Male Black/African American American Indian Asian/Pacific Islander **Circle Race:** Caucasian Hispanic Email Address: _____ Current Mailing Address: Street Address City Zip State For church vehicle drivers: Driver License #: State Issued: