

USA Wrestling Connecticut COACH/TEAM LEADER STAFF APPLICATION

Name: Driver's License # _____ Social Security Number _____

Address: _____ City: _____ Zip: _____

Home Phone: E-Mail: _____

USAWCT Member Club you represent: _____ Date of Birth: ____/____/____

Have you ever been found guilty, or pled guilty or no contest, to a felony charge? ___Yes ___No
If you answered yes, please attach a short explanation of the charge noting the date, nature and place of the incident leading to the charge, where it was filed and its disposition.

Have you ever had a lawsuit alleging actual or attempted misconduct, physical or child abuse, against you which resulted in a judgment entered against you, which was settled out of court, or which was dismissed because the statute of limitations had expired? ___Yes ___No
If you answered yes, please attach a short explanation of the lawsuit noting the date, nature and place of the incident leading to the lawsuit, where it was filed and its disposition.

Have you ever terminated your employment or service in a volunteer position or had your employment or authorization to hold a volunteer position terminated, for reasons relating to allegations of actual or attempted misconduct, physical abuse or child abuse? ___Yes ___No
If you answered yes, please attach a short explanation of the situation noting the date of termination, the name address and phone number of the employer or volunteer supervisor, and the nature and place of the incidents in question.

Do you consent to a Criminal Records Background Check, if applicable? ___Yes ___No
Personal References: (do not list relatives)

Name Address Phone _____

Trips you are interested in: _____

As a: _____ Coach _____ Assistant Coach ___ Team Leader _____ Assistant Team Leader
Do you have one or both of the following? ___ Copper Coaches Card ___ Bronze Coaches Card

Please list sizes: _____ Jacket _____ T-Shirt _____ Polo Shirt _____ Shorts

Please list additional information, experience or comments: _____

The information contained in this application is true to the best of my knowledge. I recognize my duty to update this application if I become aware that any answer I have given at this time becomes inaccurate in the future. I authorize any references listed on this application to respond to any inquiries from USA Wrestling Connecticut, Inc. regarding my fitness to work with youth.

Applicant's Signature: _____ Date: _____