



CMYSA Football & Cheer

“The Beginning of a Proud Tradition”

Dear Prospective Coach:

The Board of Directors for the CMYSA, would like take the opportunity to thank the community of Caddo Mills for showing their support in anticipation of the Football and Cheer program that we have.

If you are interested in coaching in the football/cheer program you must complete the application and get it turned back into the commissioner or mailed to the CMYSA at

CMYSA – Football/Cheer
PO Box 162
Caddo Mills Tx, 75135

You must be cleared through the background check as outlines in the CMYSA by-laws and coaching policies and procedures, and be in good standing with the CMYSA.

“If you don't make a total commitment to whatever you're doing, then you start looking to bail out the first time the boat starts leaking. It's tough enough getting that boat to shore with everybody rowing, let alone when a guy stands up and starts putting his jacket on.”

--Lou Holtz

If you have any questions with regard to being a coach, or would simply like to help out, don't hesitate to let the football commissioner know. You can find all contact information for the CMYSA board on the website at www.leaguelineup.com/cmymysa.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Pager/Mobile Phone: _____ e-mail: _____

1. I am applying for a position in (circle one):

FLAG(6 and under/5-6) MUSTANG(8 and under) COLT(10 and under) JUNIOR(12 and under)

2. List children or relative who will participant in this league.

3. List any coaching or volunteer experience in youth sports of any kind:

Name	Date of birth

YR	SPORT	AGES	WHERE	POSITION

On a separate piece of paper, please write a brief narrative to answer the following questions and attach it to this application:

- State your reason for volunteering to coach in CMYSA.
- List football/cheer instructional clinics you have attended, other relative experiences and any related certifications achieved (give organization name and member ID).
- Please state the goals you would define for a team this season.
- What are your strengths in teaching football/cheer skills/mechanics?
- Is there any additional information you would like to provide to the CMYSA Board of Directors?

4. Please give two personal references:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

5. Confidential Information:

- Have you ever been convicted of a misdemeanor(s) offense in Texas and/or any other state? (other than traffic violations) Yes No
- Have you ever been convicted of a felony or felonies? Yes No
- Have you ever been removed from or voluntarily resigned from a position of authority over questions regarding moral turpitude or honesty? Yes No

I, the undersigned, do hereby agree to be personally liable for all equipment issued to me from the Caddo Mills Youths Sports Association (CMYSA). I agree to reimburse and/or replace any equipment at cost to me, for whatever reason as to its damage or having been lost. I also agree that I am personally liable for the costs of missing equipment that is issued to players on my team, and may be liable for the costs for replacement of helmets and/or shoulder pads that are not turned in.

I agree to collect funds on behalf of CMYSA and turn in any donations, gifts, and dues when received to the President and/or Commissioner or his/her assistant.

I understand that my acceptance or rejection for a coaching position may be determined in whole or in part by Caddo Mills Youth Sports Association ("CMYSA"), using information from a report supplied by a background screening facility of the CMYSA's choosing. Pursuant to Section 609 of the Fair Credit Reporting Act, I may be entitled to a copy of this report.

Printed Name of Applicant _____ TX DL No. _____

Signature of Applicant _____ Date _____



Background Verification Release Form

AGENCY INFORMATION

Date	Agency Name Caddo Mills Youth Sports Association		
Contact Name Tammy Beene			
Agency's Main Phone Number 903-527-0263		Agency's Fax Number 903-527-6024	

APPLICANT INFORMATION:

Applicant Full Name (Last, First, MI)		Maiden or Other Name(s) Used	
Current Address			
City		State	Zip Code
Social Security Number		Date of Birth	Driver's License Number
Position Applied For		State Issued	
Gender <input type="checkbox"/> Male <input type="checkbox"/> Female	Race <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		

I hereby authorize VERIFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VERIFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

Applicant's Signature

Date

Applicant's Printed Name

Parent/Guardian's Signature
(if under 18 years of age)