



Volunteer Coach Application

TIER III

On behalf of the Governing Board and Administration of Bullhead City Elementary School District, we appreciate your interest in our district. We are proud of our outstanding teachers and support staff, however, the quality of our services is significantly enhanced by hundreds of individuals, like you, who contribute their time and talents. Because of the tremendous responsibility we have to the children of our community, the following information is needed from each individual who has contact with our students. The district will conduct a criminal record check on individuals who provide services to students without the supervision of a certified employee. Please be aware the district may decline volunteer services based upon criminal activity related to violence, physical abuse, sexual abuse, or alcohol/drugs. We appreciate your willingness to provide us with this information. Please complete the following Volunteer Information Form and return to your preferred site. Again thank you for your services.

For the protection of students and in accordance with A.R.S. 15-512, all Tier III volunteers are required to be fingerprinted and to have no record of convictions of offenses identified in the statute.

School Name _____ Sport _____

Are you the parent or guardian of a child enrolled in any Bullhead City School District school? ☐ YES ☐ NO

If YES: Name of Child _____ School _____

PERSONAL INFORMATION

Last Name _____ First Name _____ Middle Initial _____

Street Address _____

City _____ State _____ Zip Code _____

Telephone Number _____ Cell Number _____

Person to contact in case of an emergency:

Name _____ Telephone Number _____

Current/Most recent Employer _____

Address _____

Telephone _____

Dates of Employment _____

References List three references that have first-hand knowledge of your working ability, character and personality.

Name _____ Telephone _____

Name _____ Telephone _____

Name _____ Telephone _____

1. Have you ever coached in a school (high school/elementary) setting? ☐ Yes ☐ No

If yes, explain: _____

2. List your previous coaching experience(s):

Sport _____ School _____ Years coached _____

Sport _____ School _____ Years coached _____

Sport _____ School _____ Years coached _____

3. What experience have you had playing the sport you are coaching?

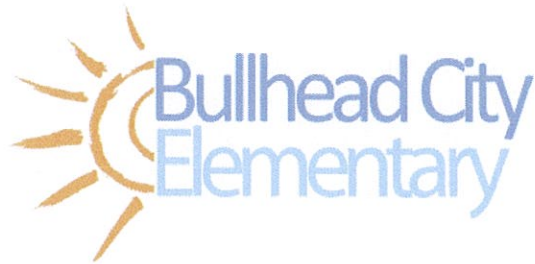
4. Explain your philosophy of discipline as it pertains to your area of coaching:

5. Explain what you want to accomplish by the end of the season with the students you have coached:

My signature below verifies that I understand that I will serve the district as a coach, and it is my responsibility to follow all District, A/A and school rules & regulations that apply to coaching.

Date

Signature



CONFIDENTIALITY REQUIREMENT FORM

Volunteers are required to comply with all requirements concerning handling of, and exposure to confidential information and materials in the school setting.

I, _____ a volunteer of Bullhead City Elementary School District have been informed of my personal responsibility to honor and protect confidential matters and documents to which I have been exposed or have access to in my official volunteer duties.

Further, I understand and agree that willful violation of the confidentiality of any student's school related information shall result in immediate removal from my volunteer assignments.

Volunteer

Date

FRCA NOTICE AND ACKNOWLEDGMENT

IMPORTANT- PLEASE READ CAREFULLY BEFORE SIGNING ACKNOWLEDGMENT

NOTICE REGARDING BACKGROUND INVESTIGATION

Bullhead City Elementary School District #15 ("the company") may obtain information about you from a consumer reporting agency for volunteering purposes. Thus, you may be the subject of a "consumer report" and/ or any "investigation consumer report" which may include, but not limited to: employment and education verifications; social security number verification; criminal and civil court records; personal interviews; driving records; and / or any other public records or any other information bearing on your character, general reputation, person characteristics and trustworthiness. These reports may be obtained at any time after receipt of your authorization and, if you are approved, for school volunteering. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigation consumer report.

The report will be generated by Universal Background Screening (4000 North 16th Central Avenue, Suite 1000, Phoenix, AZ 85012, 1-877-263-8033) or another outside organization. The scope of this notice and authorization is all encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are approved for school volunteering, to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigation consumer report.

Request for Background Check

Social Security Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Date of Birth – used for identification purposes only

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Month

Date

Year

First Name	Middle Name	Last Name
Other names Used (maiden name, AKA names, etc.)		

Current Residential Address		
City	State	Zip Code

List each CITY, STATE, and ZIP CODE (if known) where you have lived during the past seven years:

City	State	Zip code	From Date	To Date

Driver's License Number	State of Issue
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ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the NOTICE REGARDING BACKGROUND INVESTIGATION (back page) and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT (separate document) and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" at any time after receipt of the authorization and, if I am hired, throughout my employment. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by Universal Background Screening, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax") or photographic copy of this Authorization shall be as valid as the original.

Please read back page before signing acknowledgment

Signature

Date

Full Name (First/Middle/Last)

Social Security Number (SSN)



VOLUNTEER CREDENTIAL REQUIREMENTS

Name _____
Print Name

I, _____, being duly sworn, do hereby certify that I have never been convicted of or admitted in open court or pursuant to a plea agreement committing, and am not now awaiting trial for committing any of the following criminal offenses in the State of Arizona or similar offenses in any other jurisdiction:

Sexual abuse of a minor Incest First or second degree murder Kidnapping Arson Sexual assault Sexual exploitation of a minor Felony offenses involving contributing to the delinquency of a minor Commercial sexual exploitation of a minor Felony offenses involving sale, distribution, or transportation of, offer to sell, transport, or distribute, or conspiracy to sell, transport, or distribute marijuana or dangerous or narcotic drugs Manslaughter Exploitation of minors involving drug offenses	Felony offenses involving the possession or use of marijuana, dangerous drugs or narcotic drugs Misdemeanor offenses involving the possession or use of marijuana or dangerous drugs Burglary in the first degree Burglary in the second or third degree Aggravated or armed robbery Robbery A dangerous crime against children as defined in A.R.S 13-604.01 Child abuse Sexual conduct with a minor Molestation of a child Assault or Aggravated assault
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Volunteer's Signature Date

Subscriber, sworn to, and acknowledged before me by _____

This _____ day of _____, _____ in Mohave County, Arizona.
Day Month Year

My Commission Expires: _____
Notary Public

Overview of Pertinent Policies and Procedures

As it relates to the integrity of interaction with students,
Volunteers must meet the same expectations as employees.

Staff Ethics and Conduct

Volunteers are expected to uphold high standards and treat employees, students, parents, and community members with respect and courtesy. Adults should be role models to students which includes their dress and language. Language that may be offensive to others should be avoided. Dress should be in accordance with the dress code and appropriate to the position duties.

Drug and Alcohol Free Workplace

Adults may not be in the possession of, or influence of, drugs or alcohol in the workplace which includes school property, school vehicles or any school-sponsored activities.

Tobacco Free Workplace

Adults may not smoke or use tobacco on any school grounds including in school vehicles or in private vehicle on school property.

Harassment

Adults are prohibited from harassing other employees, parents, or students with language or conduct that is sexual in nature or offensive based upon race, color, gender, national origin, religious beliefs or disabilities. Anyone who believes he or she has been harassed should report the incident immediately to school administrator. Anyone who personally observes or receives a complaint of sexual harassment between students shall promptly report the behavior to the school principal. (See attached Policy ACA & ACAB)

Student-Staff Relationships

At no time may adults engage in romantic relationship with students. Inappropriate physical or sexual contact with students is grounds for discipline which may include dismissal and criminal action. Attached are suggestions for avoiding false accusations of inappropriate touching or contact with students.

Suspected Child Abuse

School employees and volunteers are mandated to report suspected child abuse. Suspicions of abuse should not be investigated but forwarded to the school principal for action.

Confidential Student Records

Student information and records must be kept confidential and should be shared on a need to know basis only.

Student Discipline

Physical discipline (corporal punishment) is not allowed in any form for any offense. This includes any physical contact with students for disciplinary action. Threats of use of physical force are prohibited when dealing with students. Call for assistance if circumstances of student discipline require it.

SUGGESTIONS FOR AVOIDING FALSE ACCUSATIONS

Touching Students: Factors to consider

Every parent knows that children benefit from gentle touches and hugs. Unfortunately, innocent gestures can be misinterpreted as inappropriate touching, excessive force or even abuse. Touching children at school increases the risk that school volunteer will face these types of accusations. The touching of students factors are structured in such a way as to avoid any misunderstanding, interpretations and accusations. Guidelines are listed below.

AGE OF THE CHILD

Preschool through third grade:

Hugs and gentle touches are common during these grades, but are risky- especially for adults. Some adults never initiate hugs and do not permit student initiated hugs. Initiating hugging of any type is discouraged. If children initiate a hug, try to position yourself so that the hug is "side to side."

Middle grades (fourth through eighth grades):

Touching becomes less accepted and more risky. False accusations of improper touching are more frequent during grades four through eight, in part because some girls become preoccupied with their changing bodies and emerging sexuality. Girls also can be very sensitive to innocent remarks about clothing and physical appearance. Prohibitive behavior includes but is not limited to patting knees, calling students "pet" names, and discussing personal or intimate information.

During junior high, some students become more aggressive. Volunteers should avoid using physical force for any type for disciplinary problems. Always call teacher or administrator for assistance to avoid any un-necessary physical involvement. In addition, volunteers often get in trouble with this age group if they give gifts or loans to students or if they attempt to counsel students on romantic matters.

ADULT'S GENDER

Male volunteers may be perceived as more physical aggressors and face a greater risk of false allegations. Male volunteers should consider their behavior very carefully. Should a male volunteer need clarification on any questionable situation, they are encouraged to consult a school administrator.

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CULTURAL/PERSONAL FACTORS

Some individuals and some cultures are uncomfortable with any sort of touching. Adults must be sensitive to these personal and cultural differences. If students indicate by word or action that they are not comfortable with touching, avoid all physical contact unless absolutely necessary for safety reasons. Previously abused children may be more likely to misinterpret a neutral touch as sexual or abusive.

Common Sense Suggestions for Avoiding False Claims of Abuse and Inappropriate Touching:

1. **Avoid being alone with a student of either sex.** Risky situations include keeping a student in for recess, make-up tests, tutoring, and after school detention. Arrange to have the activity within sight of another adult. Avoid repeated one-to-one contact with an individual student. For example, instead of assigning one child to help clean up after class, ask two students.
2. **Avoid physical contact with students which could be misunderstood as sexual in nature.** Whenever possible, keep your own "personal space." If younger students want to hug you, tell them that it is better to shake hands or do a high five. Develop a repertoire for reinforcing student behavior and giving praise without touching students. If a student ignores your request to avoid physical contact, you should notify the teacher or administrator immediately.
3. **Avoid using physical force to enforce discipline.** Use verbal commands with an adult voice and/or request teacher's assistance. District policy prohibits volunteers and teachers from grabbing students to move them in a particular direction or touching them to get their attention.
4. **Avoid sending written communications to students, giving gifts to students, or socializing with students in situations which could be misconstrued as personal or romantic.** It is against District policy to invite students to your home or other activities.
5. **Avoid any comments with suggestive or double entendre overtones.** Teasing or comments on a student's physical appearance are inappropriate behavior. Students may report your remarks in ways that distort your meaning.
6. **Do not be drawn into discussions of any sexual topics or tasteless jokes or suggestive song lyrics.** Report to the teacher or school administrator any such conversational attempts made to you.
7. **If a student confides in you regarding a personal topic of a sexual nature, report the conversation in writing to the school administrator immediately.**
8. **District policy prohibits you from transporting students in your personal vehicle.** Being alone in a car with a student exposes you to accusations of misconduct in a situation where it is your word against the student's word. In addition, you may be liable for an accident.

Attention all Tier III Coaching Applicants:

**NATIONAL FEDERATION OF HIGH SCHOOL
COACHING CERTIFICATION COURSES**

www.nfhslearn.com

Coaching Qualifications – All Head and Assistant Coaches in the Bullhead City Elementary School District, whether paid or volunteer, should support Arizona Inter-scholastic By-Laws along with CPR & First Aid.

“Fundamentals of Coaching Course”

The “NFHS Fundamentals of Coaching Course” provides a unique student-centered curriculum for interscholastic teacher/coaches, assisting them in creating a healthy and age-appropriate athletic experience that supports the educational mission of our nation’s schools.

“Concussion in Sports – What You Need To Know”

Sports-related concussion in high school sports can be serious or even life-threatening situations if not managed correctly. National Federation of State High School Associations (NFHS) and Centers for Disease Control and Prevention (CDC) have teamed up to provide information and resources to help educate coaches, officials, parents and students on the importance of proper concussion recognition and management in high school sports. Mick Koester M.D., ATC, Chair of the NFHS Sports Medicine Advisory Committee and Director of the Slocum Sports Concussion in Eugene, Oregon takes you through this course. In this course, you will understand the impact sports-related concussion can have on your players, how to recognize a suspected concussion, the proper protocols to manage a suspected concussion, and steps to help your player return to play safely after experiencing a concussion.

CPR/First Aid Training and Certification

In addition to the above resources, all coaches in BCESD are encouraged to have a CPR and First Aid Certification.

Athletic Director: _____ Human Resources Rec’d: _____ Background Check: _____

Fingerprints Taken: _____ Completed: _____ Copy Sent to School: _____

BULLHEAD CITY ELEMENTARY SCHOOL DISTRICT

VOLUNTEER CODE OF CONDUCT

(This document defines the district's expectations for all school volunteers)

As a volunteer, I agree to abide by the following code of volunteer conduct:

1. Immediately upon arrival, I will sign in at the main office or the designated sign-in area.
2. I will wear or show volunteer identification.
3. I will use only adult bathroom facilities.
4. I agree to never be alone with individual students who are not under the supervision of teachers or school authorities.
5. I will not contact students outside of school hours without permission from parents.
6. I agree not to exchange telephone numbers, home addresses, e-mail addresses or any other home directory information with students for any purpose unless it is required as part of my role as a volunteer. I will exchange home directory information only with parental and administrative approval.
7. I will maintain confidentiality outside of school and will share with teachers and or school administrators any concerns that I may have related to students welfare and or safety.
8. I agree to not transport students without the written permission of parents or guardians or without the expressed permission of the school or district and will abide by District Administrative Procedures when transporting students.
9. I will not disclose, use, or disseminate student photographs or personal information about students, self, or others.
10. I agree to follow the district procedures for screening of volunteers.
11. I agree to notify the school principal if I am arrested for any reason, including misdemeanor or felony sex, drug or weapon related offense.
12. I agree only to do what is in the best personal and educational interest of every child with whom I come in contact.
13. I have read and understand "The Overview of Pertinent Policies and Procedures" and "Suggestions for Avoiding False Accusations" and commit to abide by correct practices.
14. I understand that my volunteer services must be approved or disapproved by the site Principal.

Signature of Volunteer

Date

Signature of Principal

Date

CODIGO DE CONDUCTA PARA VOLUNTARIOS

VOLUNTEER CODE OF CONDUCT

(Este document define las expectativas de el distrito para todos los voluntarios de las escuelas)

Como voluntario(a), estoy de acuerdo que debo acatar el siguiente codigo de conducta de voluntario:

1. Inmediatamente despues de Llegar, firmare en la oficina principal de la escuela o en el lugar designado para firmar, el ingreso a la escuela.
2. Portare o mostrare mi identificación como voluntario.
3. Solo utilizare los baños para adultos.
4. Estoy de acuerdo que nunca debo estar solo con ningun alumno individual, que no este bajo la supervision de los maestros (as) o funcionarios de la escuela.
5. No establecere contacto con alumnos fuera del horario de clase sin el permiso de los padres.
6. Estoy de acuerdo en no intercambiar numeros de teléfono, domicilios, e-mail u otra información del domicilio con los estudiantes para cualquier propósito a menos que se requiera como parte de la función de voluntario(a). Intercambiare la informacion del domicilio solo con la aprobación de los padres y de la administración escolar.
7. Mantendre la confidencialidad fuera de la escuela y compartire con los maestros (as) y/o adminstradores de la escuela, **cualquier** inquietud o preocupacion que tenga, relacionada con el bienestar y/o seguridad estudiantil.
8. Estoy de acuerdo en no transporter alumnos sin el permiso escrito de los padres o tutores o sin el permiso expreso de la escuela o del distrito y acatare el Procedimiento Administrativo del Distrito, cuando transporte a alumnos.
9. No divulgaré, ni usare, o distribuire fotografias de estudiantes, o información personal de estudiantes, o de mi mismo, o de otros.
10. Estoy de acuerdo en seguir los procedimientos del distrito escolar para la selección de los voluntarios.
11. Estoy de acuerdo en notificar al director (a) de la escuela si soy arrestado por cualquier razón, incluyendo delito menor, o delito sexual, delitos de drogas o, relacionados con armas.
12. Estoy de acuerdo en hacer lo que sea en el mayor interés personal y educativo de cada niño (a) con el que tenga contacto.
13. He leído y entiendo “El Conjunto de Poliza y Procedimientos” y “Sugerencias para evitar acusaciones falsas”, y me comprometo a cumplir con las prácticas correctas.
14. Yo entiendo quemis servicios voluntaries deben ser aprobados o desaprobados por el director del sitio.

Estoy de acuerdo en observar y acatar el Codigo de Conducta para Voluntarios en todo momento o **finalizar** el trabajo como **voluntario (a) inmediatamente.**

Firma del Voluntario

Fecha

Firma del Director/a

Fecha

Please contact the District Office for a Fingerprint
Clearance application

Bullhead City Elementary School District

1004 Hancock Rd.

Bullhead City, AZ 86442

928-758-3961

bshannon@bullheadschoools.com