

**STRENGTH IN UNITY**



@OSAELITE



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OSAYOUTHBASKETBALL@GMAIL.COM



**OSA Elite AAU BASKETBALL PROGRAM  
COACHING APPLICATION FORM  
(after completion email form to osayouthbasketball@gmail.com)**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Home Address Street:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Grade to Coach (Boy or Girl):** \_\_\_\_\_ **Child on Team (Name):** \_\_\_\_\_ **Head Coach or Assistant:** \_\_\_\_\_

**Home Phone Number:** \_\_\_\_\_ **Daytime Phone Number:** \_\_\_\_\_

**Cell Phone Number:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_

**Employer:** \_\_\_\_\_ **Years with Employer:** \_\_\_\_\_

**Employer Address:** \_\_\_\_\_

**Previous Basketball Coaching Experience:** \_\_\_\_\_

\_\_\_\_\_

**Previous Coaching Experience Other Sports:** \_\_\_\_\_

\_\_\_\_\_

**References (Name, Phone number, email, relationship)**

\_\_\_\_\_

**Willing to Volunteer** \_\_\_\_\_. **If no, amount of pay being sought by hour** \_\_\_\_\_.

**Criminal History: Have you ever been convicted of a crime, other than a routine traffic ticket?**

**Yes** \_\_\_\_ **No** \_\_\_\_ **If Yes, please attach and explain on separate sheet of paper.**

In OSA Elite's efforts to attract the highest quality volunteer staff, I have been advised that, as a part of the application process for volunteer service with OSA Elite, an inquiry will be made concerning my background, including but not limited to a criminal background check, and I fully consent to and authorize all such inquiries. If OSA Elite accepts my volunteer service, I will comply with all policies established from time to time by the organization. I understand that inquiries may be made concerning my background, experience, and prior employment. I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since it is made with my consent and it is in my interest that I be considered for volunteer service. I understand that OSA Elite does not condone child abuse and that OSA Elite will be seeking information in my background related to child abuse. I understand that OSA Elite will take seriously any allegations or suspicions of child abuse and will report such allegations to the police and state agencies for investigation. I certify that all statements made by me on this application are true to the best of my knowledge and that I have withheld nothing that would, if disclosed, affect this application unfavorably. I understand and agree that any misrepresentation or omission of facts would exclude my being considered for volunteer service or, after my service begins, may be cause for termination. I also understand that OSA Elite strongly discourages any fraternization outside of OSA Elite programs between volunteer staff members and youth participants. I understand and agree that if my service as a volunteer is

accepted, there is no contract period for volunteer service and my volunteer service would be solely "at will," giving either me or OSA Elite the right to terminate my volunteer service at any time without liability or obligation.

Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_