



Muhlenberg School District Athletic Department

Volunteer Coaching Application

Date _____

Name _____ Social Security # _____

Address _____ Telephone (H) _____

_____ Telephone (W) _____

E-Mail address _____

Volunteer Coaching Position Applying for: _____

I apply for the position of volunteer coach with full understanding of the following:

1. This is not a paid position and will not become a paid position at any time during this assignment.
2. I must have my Act 34 Criminal Background check, Act 151 Child Abuse clearance and Physical including the required TB test on file with the Athletic Department to provide services to students within 30 days of Board Approval.
3. I agree to comply with the attached Safety Guidelines for Volunteer Coaches.
4. I agree to attend training regarding the following School District policies:
 - a. Sexual harassment against students and employees;
 - b. Students accidents;
 - c. Hazing;
 - d. Drugs and alcohol; and
 - e. Student discipline.
5. I understand that while I am a volunteer, I am subject to supervision by the School District and if at any time the School District feels it necessary to terminate my position, they may do so.

Signature – Volunteer Coach

Attachment: Safety Guidelines for Volunteer Coaches