

South Ottawa Little League 2012 Spring Coaching Application



Thank you for putting your name forward to coach baseball in the coming season. Coaches play a key role in creating a fun environment to build the skill and confidence in players at all levels.

APPLICANT INFORMATION		
Last Name	First	Date of Birth
Street Address		Apartment/Unit #
City	Province	Postal code
Phone	E-mail Address(es)	

CHILDREN PLAYING IN SOUTH OTTAWA LITTLE LEAGUE (SOLL)	
Name:	Division:
HAVE YOU COACHED IN SOLL BEFORE Yes <input type="checkbox"/> NO <input type="checkbox"/> YEAR(S) DIVISION(S)	

IN WHAT DIVISION DO YOU WISH TO COACH? (Please place check mark/if more than one indicate 1 st /2 nd choices)		
Division	Head Coach	Assistant Coach
Blastball	<input type="checkbox"/>	<input type="checkbox"/>
T-Ball	<input type="checkbox"/>	<input type="checkbox"/>
Coach Pitch	<input type="checkbox"/>	<input type="checkbox"/>
Minors	<input type="checkbox"/>	<input type="checkbox"/>
Majors	<input type="checkbox"/>	<input type="checkbox"/>
Junior	<input type="checkbox"/>	<input type="checkbox"/>
Senior	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Undecided <input type="checkbox"/> Put me in where you need help <input type="checkbox"/> Not Sure- Need to Discuss with League		

COACHING EXPERIENCE (None required- we just need to know where you're at)

COACHING COURSES	COMPLETED/ DATES	WOULD LIKE TO ATTEND
LEVEL 1	<input type="checkbox"/>	<input type="checkbox"/>
LEVEL 2	<input type="checkbox"/>	<input type="checkbox"/>
Al Herbeck Seminar	<input type="checkbox"/>	<input type="checkbox"/>
OTHERS (Specify)	<input type="checkbox"/>	<input type="checkbox"/>

REFERENCES: LIST 2 REFERENCES, AT LEAST 1 OF WHICH HAS KNOWLEDGE OF YOUR PARTICIPATION AS A VOLUNTEER IN YOUTH PROGRAM. DO NOT USE A FAMILY MEMBER AS REFERENCE.	
NAMES	PHONE NUMBER

*******POLICE RECORD CHECKS (PRC):** A PRC dated within 1 year are required by Little League to guard children's safety. Please attach a valid PRC or a completed application with required ID. Visit our website or see PRC application for full details.

LITTLE LEAGUE AGREEMENT
<p>Little League Canada has instituted a screening program for all coaches/volunteers in the Child Safe Program. As a condition of volunteering, I give permission for the Little League organization to conduct a background check on me which may include a review of sex offender registries, child abuse and police records. I understand that, if appointed, my position is conditional upon the league receiving non inappropriate information on my background. I hereby release and agree to hold harmless from liability the local Little League, Little League Canada, Little League Baseball Incorporated, the officers, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that regardless of previous appointments, Little League is not obligated to appoint me to a volunteer position. If appointed I understand that prior to the expiration of my term, I am subjected to suspension by the President and removal by the Board of Directors to violation of Little League policies or principles.</p>
<p>Applicant Signature : _____ Date: _____</p> <p>Applicant Name (Please print or type) _____</p>
<p>NOTE: THE LOCAL LITTLE LEAGUE, LITTLE LEAGUE BASEBALL CANADA AND LITTLE LEAGUE BASEBALL INCORPORATED WILL NOT DISCRIMINATE AGAINST ANY PERSON ON THE BASIS OF RACE, CREED, COLOUR, NATIONAL ORGIN, MARITAL STATUS, GENDER, SEXUAL ORIENTATION, OR DISABLITIY</p>

Please print and mail along with PRC copy or application to:

Peggy Pratt 92 Malhotra Court Ottawa, ON K1V 1K2