



PORTLAND JUNIOR HAWKS, INC.
PART I –COACHING APPLICATION
(Attach additional sheets if necessary)

Name: _____ Phone #: _____ Level to Coach: _____

1. Circle the highest level of USA Hockey Coaching Certification attained:
Initiation Associate Intermediate Advanced
Card Number: _____ Expiration: _____

2. Previous ice hockey coaching experience: (Please list age group, association, year, etc.)

3. Previous coaching positions coaching youth in other sports:

4. Please explain your coaching philosophy including your feelings about player discipline, parental influence, attitude, sportsmanship, etc.:

5. Highest education level completed:
Did you graduate from a university or college?: Yes No If so, which institution?

6. Employed by: _____ Since: _____
Employer's Phone #: _____ Immediate Supervisor: _____

7. What unique qualities do you bring to the hockey organization? _____

8. What qualities do you look for in choosing your assistant coach? _____

9. I have been known by the following names or aliases, other than that listed as my primary name on this application: _____

10. References – Please list those who are familiar with your character as it relates to working with youth.
(References may be checked)
Name: _____ Phone: _____
Name: _____ Phone: _____
Name: _____ Phone: _____

PORTLAND JUNIOR HAWKS, INC.
PART II – COACHING APPLICATION – CONFIDENTIAL INFORMATION
 (COACH'S APPLICATION, WAIVER, ACKNOWLEDGEMENT, AFFIDAVIT, CONSENT AND RELEASE)

Name: _____ DOB: _____ Age: _____ Home Phone: _____

Physical Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: (if different from above): _____

Previous Address (if at current address less than 5 years: _____

City: _____ State: _____ Zip: _____

Driver's License #: _____ State: _____

APPLICANT: (Please complete all spaces. Please print legibly.)

I, _____ hereby formally apply for a volunteer coaching position as Head/Assistant Coach with the Portland Junior Hawks Association for the 20____-20____ season only and understand, acknowledge, agree and affirm as follows:

PERSONAL INFORMATION

PLEASE COMPLETE THE FOLLOWING: You must answer ALL questions. If the answer to any question is or was "YES", please describe below, IN DETAIL, the charges and legal resolution. Use additional pages if necessary.

Have you ever been arrested or convicted of any of the following: (Circle "Yes" or "No")

| | | | | | |
|--|-----|----|----------------------------------|-----|----|
| Driving under the influence of alcohol | Yes | No | Assault | Yes | No |
| Alcohol-related reckless driving | Yes | No | Aggravated assault | Yes | No |
| Furnishing alcohol or tobacco to a minor | Yes | No | Child abuse | Yes | No |
| Possession of a controlled substance | Yes | No | Child sexual abuse | Yes | No |
| Possession of drug paraphernalia | Yes | No | Forcible sexual abuse | Yes | No |
| Possession of a controlled substance with intent to distribute | Yes | No | Rape | Yes | No |
| Distribution of a controlled substance | Yes | No | Aggravated rape | Yes | No |
| Child abuse homicide | Yes | No | Homicide/Negligent homicide | Yes | No |
| Abuse or neglect of a child | Yes | No | Kidnapping/Child Kidnapping | Yes | No |
| Aggravated sexual abuse of a child | Yes | No | Aggravated Kidnapping | Yes | No |
| Dealing in material harmful to a minor | Yes | No | Rape/Object rape of a child | Yes | No |
| Sexual exploitation of a minor | Yes | No | Sale of a child | Yes | No |
| Assault/Battery on a mentally retarded person | Yes | No | Assault/Battery on a minor child | Yes | No |
| Intent to commit any of the above crimes | Yes | No | | | |

Do you currently or have you ever used illegal drugs? Yes No
 Are you currently on probation for any crime?..... Yes No
 Is your driver's license currently suspended or revoked?..... Yes No
 Do you have any medical or psychological condition which might cause you to be unable to control yourself while supervising children?..... Yes No
 Have you ever been released or removed from any position in which you were acting as a coach or other volunteer in which children were under your supervision?..... Yes No
 Are you currently taking any medication which may affect your abilities to act responsibly when involved in the supervision of children?..... Yes
 No

If the answer to any of the above questions is yes, please provide a detailed explanation using additional pages.

Is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of minor children? _____

PART II – COACHING APPLICATION (cont.)

- a) The information that I have provided herein and in the “Coaching Application – Parts I and II” are true and correct and may be verified, if deemed appropriate, by the Portland Junior Hawks Board of Directors. The Board or its assigns may contact persons or organizations named in this application, may contact any person or organization that may have information concerning me or may verify any information provided by me by any other legal means deemed appropriate. I hereby release and agree to hold harmless from liability any person or organization that provides information as well as the Portland Junior Hawks and its officers, employees and volunteers thereof;
- b) I agree to comply completely with all provisions of the bylaws of the Portland Junior Hawks, their rules, policies, administrative requirements and regulations as adopted from time to time;
- c) I agree to indemnify and hold harmless the Portland Junior Hawks for any losses, costs, and legal fees incurred, whether or not an action is filed in Court, in responding to any claim made against the Portland Junior Hawks by a player, a player’s family, or a third person or entity concerning my fitness to serve as a coach or assistant coach, if I have provided false or incomplete information to the Portland Junior Hawks or if my future activities and actions are in contravention of the rules, policies, administrative requirements and/or regulations as adopted from time to time;
- d) I will not knowingly or willfully take part in or condone any conduct which may reasonably be construed as to be harmful or dangerous to any of the minor children for whom I have responsibility;
- e) I agree to seek redress only through the administrative procedures outlined by the Portland Junior Hawks, the Oregon State Hockey Association (“OSHA”), and USA Hockey, and hereby agree not to sue or bring action in a court of law against either the Portland Junior Hawks, “OSHA”, or USA Hockey for any reason whatsoever until all my administrative remedies provided by USA Hockey’s bylaws have been exhausted. Should I file any legal action in conflict with this paragraph and thereby requiring defense by the Portland Junior Hawks for all costs and attorney fees accruing to the Portland Junior Hawks in such defense, regardless of the final disposition of the action;
- f) I understand and accept that I may be banned or suspended for any actions which violate any policy, rule, administrative requirement or regulation as adopted by the Portland Junior Hawks Board of Directors from time to time;
- g) My application may be rejected because of my criminal history or current or pending legal charges regarding any crime listed herein or any other crime which may involve the health, safety or welfare of children and I waive any right to a hearing should it be determined by the Portland Junior Hawks that my past criminal history or current pending legal charges are sufficient grounds for denial of this application. Should I request a hearing before the Portland Junior Hawks, “OSHA”, or USA Hockey and a hearing be granted, I hereby waive any right to confidentiality which I may have had prior to such hearing;
- h) I acknowledge that there are certain risks inherent in coaching and playing hockey. I hereby release and covenant not to sue the Portland Junior Hawks for any injury that I may sustain in the course of being or acting as a hockey coach for the Portland Junior Hawks; and
- i) By signing this application, I acknowledge, understand and agree to the following:
- 1) That I have applied to act as a volunteer, on an “at will” basis for the Portland Junior Hawks and that should my application be accepted, my immediate superior(s) is the Director of Coaching and Portland Junior Hawks Board of Directors;
 - 2) That my application may or may not be accepted, with or without cause;
 - 3) That there is and will be no remuneration involved in my activities;
 - 4) That the health, safety and welfare of all minor participants in the Portland Junior Hawks’ hockey association is my first and foremost concern and I will do nothing to jeopardize their health, safety and welfare;
 - 5) That unless otherwise terminated, the term of my coaching tenure shall be only for the season applied for herein and that I must reapply for each season in which I wish to volunteer;
- 6) That the Director of Coaching or Portland Junior Hawks Board of Directors may assign to me any or all of the specific “Coaching Duties” as enumerated below, which duties may or may not involve direct coaching from the bench and that failure to comply with the duties assigned to me may constitute cause for my

removal from my coaching duties. Such assignment of duties need not be formal and may change from time to time.

- 7) That I may be removed from my position as a coach at any time by the Director of Coaching or by the Board of Directors of the Portland Junior Hawks, with or without cause; and
- 8) I understand and agree that a "Statute of Limitations" defense is not allowed in cases involving sexual or physical abuse.

Coaching Duties

- Being on the bench during games.
- Model behavior consistent with the Portland Junior Hawks mission.
- Being on the ice during practices or ensuring that a qualified replacement is available.
- Monitoring locker rooms before and after games and practices.
- Arranging for water bottles to be available for games and practices.
- Fulfilling any other act or duty assigned to me by the Director of Coaching or Portland Junior Hawks Board of Directors.

Waiver

In connection with my application for a position which involves care, custody or control of minor children, I hereby authorize the Portland Junior Hawks, Inc. to review my past and present employment, education, other volunteer participation and to conduct a criminal history background check to ascertain any and all information which may be pertinent to my volunteer qualifications. I understand that I shall be banned for life for any past conviction for a sexual crime against a minor. I also understand that, with the exception of sexual crimes against minors, my prior criminal history does not preclude my successful application by may, however, be the only criteria used for rejection. I release all persons, organizations, or government agencies, from any damages of, or resulting from furnishing such information and the Portland Junior Hawks Board of Directors from exercising its right to reject my application based solely on my past criminal history.

Applicant's Signature

Date