

Oroville Union High School District
Application for Coaching

Name: _____ SS #: _____

Address: _____ DOB: _____

City, State, Zip _____ Phone #: _____

School/Sport(s): _____ Position: _____

Do you have any criminal charges pending against you? ☐ Yes ☐ No

Have you ever been convicted of a felony or misdemeanor? ☐ Yes ☐ No

Have you ever been convicted of a sex, drug or alcohol related offense
or a crime of violence? ☐ Yes ☐ No

Are you required to register as a sex offender under Penal Code 209.95? ☐ Yes ☐ No

If you answered "yes" to any of the questions above, please provide an explanation on the back of this form.

By signing below, you declare under penalty of perjury, that the above information is true. You also declare that you will immediately notify school/district officials if any of the above information should change.

Applicant's Signature: _____ Date: _____

❖ All applicants must fill out the attached Oath of Allegiance, I-9 and Employee Emergency Card.

❖ All paid applicants must fill out the attached W-4.

For District Office Use Only

Verify the bolded information below with the Athletic Director:

Completion date of the CIF coaching course: _____

Completion date of the online concussion training: _____

Completion date of the online heat illness prevention training: _____

Completion date of the online cardiac arrest training: _____

Completion date of mandated reporting: _____

Is this a paid position? ☐ Yes ☐ No **If yes, stipend amount: \$** _____

Expiration Dates: CPR: _____ First Aid: _____ TB: _____

DOJ/FBI Clearance Date: _____ ASCC Date: _____ Drug Screen: _____

Notes: _____

I declare that all clearances have been verified and all required paperwork is attached to this application. This applicant has been given information on (all coaches) – Annual Notice to Employees, Rights to Workers Compensation Benefits and Sexual Harassment Hurts Everyone; and, if paid – State Disability Insurance Provision and California's Programs for the Unemployed.

District Office Signature: _____ Date: _____

Board Approval Date: _____ AD Notification Date: _____