League # / Name	Position Code	
Club Name / Affiliate	Coach	Vol
District #	Referee	Ma
	Administration	

Position Code	
Coach	Volunteer
Referee	Manager/Coordinator
Administration	







## EMPLOYMENT/VOLUNTEER DISCLOSURE STATEMENT

FIRST NAME AND INITIAL	LAST NAME		SOCIAL SECURITY NUMBER	
ADDRESS	CITY		STATE, ZIP CODE	
HOME PHONE BUSINESS	PHONE EMAIL ADI	DRESS	DATE OF BIRTH	
COACHING LICENSE	REFEREE GRADE		GENDER M F	
DRIVERS LICENSE NUMBER	STATE ISSUED		EXPIRATION DATE	
1. Background in work with youth	Position		Years	
2. Experience in soccer	Position		Years	
3. Experience in youth soccer	Position		Years	
4. Previous residence (for past 5 years) (Use back of form if necessary)	City		State	
5. Have you ever been convicted of a c If yes, please explain: (Use back of		Yes	No	
6. Have you ever been convicted of a c If yes, please explain: (Use back of		Yes	No	
b. In applying for a Utah y this form is subject to verification.	violence or of a crime again youth Soccer Association poerification, which may inclunt must be updated at least of	nst a person. osition, the inde a criminal every two (2)	) years.	
Signature	Printed Name		Date	