



Candidate Information (PLEASE PRINT)

Last Name _____

First Name _____

Middle Name _____

Name Suffix _____

(Example: Sr., Jr., II)

DOB _____

(MM/DD/YEAR)

Sex: Male Female (please circle)

Phone Number _____

(Area Code Included)

Street Name _____

(Example: N. Cherry St.)

House # _____

(Example 1234)

State _____ Zip _____

City _____

DL State _____ (example: AZ)

Driver License # _____

PLEASE RESPOND TO EACH QUESTION

1. Have you ever been convicted of a crime of violence or a crime against a person?	YES	NO
2. Have you ever been convicted of a felony?	YES	NO
3. Have you ever been subject to any court order involving sexual, physical or verbal abuse, including, but not limited to, a domestic or protection order?	YES	NO
4. Have you ever been adjudged liable for civil penalties or damages involving sexual, physical or verbal abuse?	YES	NO
5. Have you ever been asked to resign from any position (paid or unpaid) due to complaint(s) of sexual, physical or verbal abuse?	YES	NO
6. Do you have a history of sexual, physical or verbal abuse?	YES	NO
7. Do you have a conviction for the use, possession and/or sale of an illegal substance?	YES	NO
(Circle appropriate answer. Please explain any "Yes" responses on the back of this form or on a separate piece of paper.)		

READ CAREFULLY PRIOR TO SIGNING BELOW

I agree that I will abide by the rules of US Youth Soccer and its affiliated organizations. It is the intent of Region IV to accept coaches, administrators, volunteer and to utilize referees without a prior history of violence, child abuse and/or neglect or felony conviction(s). The information given in this statement is subject to verification through any background check organization chosen by Region IV. I understand that I may be required to be fingerprinted for further criminal checks. I understand that I may request a complete and accurate disclosure of the nature and scope of the background verification, to the extent such investigation includes information bearing on my character, general reputation or personal characteristics. I also understand that any false or misleading information I provide on this form may automatically deny membership in Region IV and result in being barred for any and all sanctioned activities for a minimum of 6 months.

SIGNATURE _____ DATE _____