

MWP Athletic Co-Op

Volunteer Coaches

Application

The WIAA is the regulating body by which all MWP athletic activities are regulated and to which participating districts must comply. The WIAA requires volunteer coaches to be approved by local School Boards and also required compliance with the following:

Name: _____

Date: _____

Address: _____

Email: _____

Age: _____

Birth Date: _____

Date of HS Graduation or GED: _____

- Sport (s) for which volunteering: _____
- Date of valid First Aid Certification: _____
(Attach copy)
- Date of valid CPR Certification: _____
(Attach copy)
- Date of WIAA approved Pole Vault Coaches Training (Pole Vault and Head Track Coach only): _____
(Attach copy)
- Date of WIAA approved Stunt Certification (Cheer Coach only): _____
(Attach copy)
- Date of WSP Background Check: _____
Approved by District? (Superintendent or Designee initial): _____
- OSPI Moral Character Supplemental Form 4020B Signed and Attached? Yes _____ No _____
- Commit to Completion of WIAA Approved Coaching Effectiveness Training Class or WIAA approved Alternative within 3 yrs: Yes _____ No _____
- Received Copy of WIAA Volunteer Coach Information: Yes _____ No _____

I agree to follow all School, WIAA and other rules, regulations that the Districts may deem appropriate and to which I have been informed. I agree to represent the MWP and the Morton and White Pass School Districts in a positive manner at all times that I am engaged as a volunteer. I agree to refrain from the use of, or be under the influence of Alcohol, Tobacco, or Drugs while engaged in volunteering or otherwise representing the MWP or either District.

Date: _____

Signature of Volunteer

Date: _____

Approved By Head Coach (s)

Date: _____

Approved By Athletic Director

Date: _____

Approved By Superintendent

Upon approval of Superintendent, volunteers may volunteer, subject to final approval of both Boards.

Date Approved By Morton School Board: _____

Date Approved By White Pass School Board: _____

WASHINGTON STATE PATROL

Identification and Criminal History Section
P.O. Box 2527, Olympia, WA 98507-2527

REQUEST FOR CRIMINAL HISTORY INFORMATION CHILD/ADULT ABUSE INFORMATION ACT

Chapter 486, Laws of 1987
(Instructions on Reverse Side)

A REQUESTOR'S AGENCY/ADDRESS

Agency Morton School District
Carlie Norris
Attn. PO Box 1219
Address Morton WA 98356
City State Zip

I certify that this request is made pursuant to and for the purpose indicated.

Carlie Norris 1/1/15
Authorized Signature Date
District Secretary
Title

B PURPOSE

- ESD/School District - no fee
 Non-Profit Busn./Org. - no fee
 Profit Business/Org. - \$10
 Superintendent of Public Instr. Certification - \$10

Fees:

Make payable to Washington State Patrol by cashier's check, money order, or commercial business account.

NO PERSONAL CHECKS ACCEPTED

C APPLICANT OF INQUIRY

Applicant's Name: _____
Last First Middle
Alias/Maiden Name: _____
Date of Birth: _____ Sex: _____ Race: _____
Month/Day/Year
Social Security Number: _____ Drivers Lic. Number/State: _____ /

Secondary dissemination of this criminal history record information response is prohibited unless in compliance with RCW 10.97.050.

** Please provide a copy of your drivers license as well.*

IDENTIFICATION DECLARING NO EVIDENCE

D WASHINGTON STATE PATROL IDENTIFICATION & CRIMINAL HISTORY SECTION

As of this date, the applicant named below shows no evidence pursuant to Chapter 486, Laws of 1987.

WSP Use Only

Business/Organization Requesting Information

Applicant's Signature

Applicant's Name

Address

City State Zip

WSP-ID-430

Right Thumb Print (Optional)



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
 Professional Certification
 Office of Professional Practices
 Old Capitol Building, PO BOX 47200
 OLYMPIA WA 98504-7200
 OPP (360) 725-6130 TTY (360) 664-3631
 Web Site: <http://www.k12.wa.us/certification>
 E-Mail: cert@k12.wa.us

CHARACTER AND FITNESS SUPPLEMENT

Please complete the following questions carefully and completely before providing information and signing the affidavit. **Any falsification or deliberate misrepresentation, including omission of a material fact, in completion of this application can be grounds for denial of certification, or in the case of a certificate holder, reprimand, suspension, or revocation of the educational certificate, credential, or license.**

ALL REQUIRED DOCUMENTATION REQUESTED BELOW MUST ACCOMPANY THIS FORM. ALL QUESTIONS MUST BE ANSWERED. IF ADDITIONAL SPACE IS NEEDED, ATTACH ON A SEPARATE SHEET OF PAPER.

SECTION I - PERSONAL INFORMATION (please print or type)

1. NAME LAST FIRST MIDDLE	2. MAIDEN NAME
3. ADDRESS CITY/STATE/ZIP	4. DATE OF BIRTH
6. TELEPHONE BUSINESS: () HOME: ()	5. SOCIAL SECURITY NO. (OPTIONAL)
7. E-MAIL	
8. Please list all former names you have used and approximate dates of use. (If more than three, list on separate sheet of paper.)	
_____ Date	
_____ Date	
_____ Date	

SECTION II - PROFESSIONAL FITNESS

- | | | |
|--------------------------|--------------------------|--|
| Yes | No | |
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Have you ever held or do you currently hold a Washington education certificate? |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Have you ever held or do you currently hold any education certificate, credential or license authorizing service in the public/private schools in another state, province, territory, or country? If "yes," list the states, provinces, territories, and/or countries: |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Are you currently or have you ever been the subject of any certificate or licensing investigation or inquiry by any certification or licensing agency for allegations of misconduct? If "yes," on a separate sheet of paper, list the agency, including complete address and telephone number as well as the purpose of the investigation or inquiry. |

If you answer "yes" to questions 4 through 11 (Section II), on a separate sheet of paper, give a complete explanation, including duties, circumstances, and supporting documentation.

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Have you ever had any adverse action taken on any certificate or license? (Adverse action includes letters of warning, reprimands, suspensions [including stayed], revocations, voluntary surrenders, or voidance.) |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Have you ever been denied, or otherwise rejected for cause, an education certificate, credential, or license? |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Have you ever withdrawn an application for any education certificate, credential, or license? |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Have you ever practiced in any educational position in a public school for which you did not hold the appropriate valid educational certificate, credential, or license for that position? |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. Have you ever been dismissed, discharged, or fired from any employment position involving children or dependent adults? (Do not include RIFs) |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Have you ever resigned from or otherwise left any employment (e.g., settlement agreement) while allegations of misconduct were pending? |

Yes

No

10. Have you ever been disciplined by a past or present employer because of allegations of misconduct?

11. Are you currently or have you ever been the subject of any investigation or inquiry by an employer because of allegations of misconduct?

SECTION III - CRIMINAL HISTORY**If you answer "yes" to any of the questions 1-5 (Section III), please provide the following:**

- A. On a separate sheet of paper state the following:
- A detailed statement including what occurred, the nature of the offense, charge or warrant.
 - The name and address of the arresting agency.
 - If a court was involved, the name and address of the court.
 - The date of the arrest.
 - The final disposition, if any.
- B. If a court was involved, provide a copy of the court docket (can be obtained at the court in which the charge[s] were filed).
- C. Provide a copy of the complete arresting officer's report.
- D. If a court was involved, provide the sentence and judgment (can be obtained at the court in which the charge[s] were filed).
- E. If the arrest was driving related, provide a copy of a current and complete 5-year driving abstract.

NOTE: For questions 1, 2, 3, DO NOT include minor in possession (MIP)/minor in consumption (MIC) occurring more than 2 years ago or driving under influence (DUI) occurring more than 5 years ago.

Yes

No

1. In the last 10 years, have you ever been arrested for any crime or violation of the law? (Do NOT include Minor in Possession [MIP]/Minor in Consumption [MIC] occurring more than 2 years ago or Driving Under Influence [DUI/DWI] occurring more than 5 years ago.) (Note: For "yes" responses to 1, 2, 3, even if your case was dismissed or your record was sealed you must answer this question in the affirmative.) You need not list traffic violations for which a fine or forfeiture of less than \$300 was imposed.

2. In the last 10 years, have you ever been fingerprinted as a result of any arrest for any crime or violation of the law?

3. In the last 10 years, have you ever been convicted of any crime or violation of any law? (Note: For the purpose of this question "convicted" includes [1] all instances in which a plea of guilty or nolo contendere is the basis of conviction, [2] all proceedings in which a sentence has been suspended or deferred, [3] or bail forfeiture.) You need not list traffic violations or fines for which a fine or forfeiture of less than \$300 was imposed.

4. Have you ever been convicted of any felony crime?

5. Do you currently have any outstanding criminal charges or warrants of arrest pending against you? This would include Washington State, any other state, province, territory, and/or country.

6. Have you ever been or are you presently under investigation in any jurisdiction for possible criminal charges? If your answer is "yes," identify agency and location (street address, city, state) and the circumstances or details relating to the investigation on a separate piece of paper.

SECTION IV - FITNESS**If you answer "yes" to any question (Section IV), provide a written explanation on a separate sheet of paper:**

Yes

No

1. Have you ever exhibited any behavior or conduct which might negatively impact your ability to serve in a role which requires a certificate, credential, or license?

2. In the past 10 years, have you ever engaged in any conduct which resulted in the damage or destruction of property? (For purposes of questions 2 and 3, property includes both real and personal property owned by you or another. Do not list damages done as the result of an automobile accident.)

3. In the last 10 years, have you ever threatened to damage or destroy property?

4. Have you ever engaged in any conduct which resulted in the physical injury or harm of any person(s)? (Do not list injury or harm caused as the result of duties performed due to a job assignment such as police officer, armed forces member, or athlete.)

5. Have you ever threatened to do physical injury or harm to any person(s)? (Do not list threats issued as the result of duties performed due to a job assignment such as police officer, armed forces member, or athlete.)

SECTION IV - FITNESS

Yes No

6. Do you have a medical condition which in any way impairs or limits your ability to serve in a certificated role with reasonable skill and safety?

N/A

7. If you use chemical substance(s), does this use in any way impair or limit your ability to serve in a certificated role with reasonable skill and safety?

N/A

If you disclosed a "yes" answer to questions 6 or 7 above, are the limitations or impairments caused by your medical condition(s) or substance abuse reduced or ameliorated because you receive ongoing treatment (with or without medications) or participate in a monitoring program? Please explain on a separate sheet of paper and provide the name, address, and telephone number of the program.

8. Do you currently use illegal drugs?

9. Have you used illegal drugs in the last year?

N/A

If you disclosed a "yes" answer to question 9 above, have you successfully completed or are you participating in a supervised rehabilitation program? Please explain on a separate sheet of paper and provide the name, address, and telephone number of the program.

If you answer "yes" to questions 10 or 11, attach copies of any court orders entered in the proceeding.

Yes No

10. Have you ever been found in any dependency or domestic relation matter to have sexually assaulted or exploited any minor?

11. Have you ever been found in any dependency or domestic relation matter to have physically abused any person?

If you answer "yes" to questions 12 or 13, and a repayment agreement has been established, attach copies of the repayment agreement from the appropriate agency.

Yes No

12. Are you currently in default status on any educational loan or scholarship? (Do not include loans that are currently in a compliant deferment status.)

13. Are you currently in non-compliance with a support order?

SECTION V - CHARACTER REFERENCES

List three individuals, not related to you, who will serve as character references.

NAME		TELEPHONE NUMBER ()
MAILING ADDRESS		CITY/STATE/ZIP
E-MAIL ADDRESS (OPTIONAL)		
NAME		TELEPHONE NUMBER ()
MAILING ADDRESS		CITY/STATE/ZIP
E-MAIL ADDRESS (OPTIONAL)		
NAME		TELEPHONE NUMBER ()
MAILING ADDRESS		CITY/STATE/ZIP
E-MAIL ADDRESS (OPTIONAL)		

*** ATTENTION ***

Please complete the appropriate sections on the next page (pg. 4 of 4).

ALL APPLICANTS MUST COMPLETE THE AFFIDAVIT

AFFIDAVIT

I, _____ certify (or declare) under the penalty of perjury under the laws of the state of Washington that the foregoing and all information included in the application is true and correct.

If the information provided or answer(s) to any question on the application or character and fitness supplement changes prior to my being granted certification, I must immediately notify the Office of Professional Practices and my college/university if I am a college/university candidate.

I understand I must answer this application truthfully and completely. Any falsification or deliberate misrepresentation, including omission of a material fact, in completion of this application can be grounds for denial of certification, or in the case of a certificate holder, reprimand, suspension, or revocation of the educational certificate, credential, or license.

SIGNATURE

DATE

CITY/STATE

THE FOLLOWING AFFIDAVIT MUST BE COMPLETED BY WASHINGTON COLLEGE/UNIVERSITY STUDENTS AND THOSE COMPLETING A PESB APPROVED TRAINING PROGRAM.

AFFIDAVIT

I hereby authorize _____ to release, orally or in writing as may be requested, all student records and other personally identifiable information to the Office of the Superintendent of Public Instruction (OSPI) for the purpose of investigating and determining my eligibility for Washington State certification pursuant to RCW 28A.410, WAC 181-86, and WAC 181-87, as now or hereafter amended.
(name of institution or organization)

SIGNATURE OF APPLICANT

DATE

23.0.0 COACHES

PHILOSOPHY OF COACHES: Coaches are primarily responsible for imparting valuable educational experiences to student participants. Therefore, the WIAA believes that all coaches should have training in at least the essential areas of study required for a physical education teacher's endorsement in Washington secondary schools and the NFHS Coaches Education Program.

AFFIRMATION OF GOALS 2.2.1 AND 2.2.2 OF THE ASSOCIATION. THEREFORE:

23.1.0 EMPLOYEE OF THE DISTRICT - No school team or individual contestant shall be eligible to represent a school in an athletic contest unless the coach is an employee of the school district in which he/she coaches. This requirement applies to all paid and/or volunteer coaches. Volunteers become representatives of the District, and may serve as coaches, only upon registration, approval and authorization of the school district Board of Directors.

23.1.1 Coaching stipends and all gifts to a coach exceeding a total of \$500 in a season must be approved by the school's board of directors.

23.2.0 SUPERVISION - A school appointed coach, or another appointed member of the school faculty, must accompany any school team (or individual) at any time in connection with school sponsored interscholastic competition.

23.3.0 TRAINING - Interscholastic coaches, paid and/or volunteer, shall have training in at least the essential areas of study required for a physical education teacher's endorsement in Washington secondary schools and the NFHS Coaches Education Program. For initial employment as a paid and/or volunteer interscholastic coach, an individual must meet the following requirements:

23.3.1 COACHING REQUIREMENTS - Described below are the minimum standards for a paid and/or volunteer interscholastic coach for employment, progressive employment, and continuous employment.

- A. Hold a valid current "hands-on" First Aid Certification or have completed a School District approved "hands-on" Athletic Training/Sports Medicine course equivalent to the Red Cross First Aid Card training or be enrolled in a "hands on" First Aid class. A Sports Medicine course is to include prevention of injuries, recognition of injuries, emergency on-site procedures including transporting the injured, and rehabilitation of injuries. If a Sports Medicine course is used to fulfill this requirement, it must be renewed every three (3) years.
- B. Hold a valid current "hands-on" CPR Certification or be enrolled in a "hands-on" CPR Course.
- C. Red Cross Safety Training for Swim Coaches or Lifeguard Certification is required for all swim coaches. Red Cross Safety Training for Swim Coaches or U.S. Diving Safety certification is required for diving coaches.
- D. "Hands on" pole Vault Coaches Training is required for Pole Vault Coaches. Coaches must be recertified every three (3) years.
- E. "Hands-on" Stunt Certification is required for Cheer Coaches and dance/drill coaches who intend to have their cheer or dance/drill squad(s) perform stunts. The certification program must be approved by the Washington State Cheer Coaches Association, the Washington State Dance/Drill Coaches Association, or the WIAA. Coaches must be recertified every three (3) years.
- F. The Employing School District will require:
 1. Washington State Patrol Criminal History Information Form required by RCW 43.43.830 on file.
 2. The OSPI Moral Character Supplement Form 4020B be completed.
- G. The Coach Must Satisfy the Following Requirements:
 1. Be a high school graduate or have completed a graduation equivalency diploma (GED) program, except as in d. below
 - a. Be at least 21 years of age to be a head coach.

- b. Be at least 19 years of age to be an assistant coach except as in d. below.
- c. Hold a valid current "hands-on" First Aid Certification and CPR Certification or be enrolled in a "hands-on" First Aid Certification and CPR Course.
- d. High school students may serve as middle level volunteer assistant coaches during the designated middle school season when under the direct supervision of the middle level coach. These high school students must meet WIAA coaches standards minimum requirements to hold a valid First Aid Certification and a valid CPR card.

2. **Head Coach - High School** - Annually attend a WIAA approved rules clinic for the sport being coached, or pass the WIAA approved sports rules test required of officials for the sport being coached prior to the end of the third week of the sports season.

a. **DEFINITION OF A HEAD COACH** - A head coach is that person in charge of the highest level team for that building (e.g.), the person responsible for the highest level (varsity) team in a building that houses grades 10-12 is the head coach; the person who is responsible for the highest level team in a building that houses grades 7-9 is the head coach.

3. **Head Coach - Middle Level** - The WIAA recommends, but does not require, that the head coach at the middle level or junior high level annually attend a WIAA approved rules clinic or pass the WIAA approved sports rules test required of officials for the sport being coached.

23.3.2 **ENTRY LEVEL COACH REQUIREMENTS** – An entry level coach is in his/her first two (2) years of coaching employment.

23.3.3 **BEGINNING COACH LEVEL REQUIREMENTS (Paid and/or Volunteer Coaches)**

A. **Paid Coaches:** Before the beginning of the third year of coaching employment, a member school coach (paid or volunteer) must meet the beginning level coaching standard by either completing the class and successfully pass the test of the ASEP Coaching Principles Course or the NFHS Coaches Fundamentals Course, or attending all sessions of the WIAA Coaches School or other Coaches Schools as approved by the WIAA or must have completed a total of at least thirty (30) hours of coaches education courses. A paid coach remains at the beginning level and earns an additional fifteen (15) hours of coaching education courses within the next three (3) years of coaching and then advances to the continuous training level. (NOTE: Volunteer coaches are exempt from the continuous training standard.)

B. **Volunteer Coaches:** Must complete a coaching effectiveness training class as provided by the WIAA or a school district approved coaching course equivalent to the ASEP Coaching Principles Course or the NFHS Coaches Fundamentals Course and approved by the WIAA, or complete a total of at least thirty (30) coaches education hours. Training must be completed before the beginning of the third year of coaching. Volunteer coaches are encouraged to obtain a minimum of fifteen (15) clock hours of coaching standard courses during any three (3) year period of coaching.

23.3.4 **CONTINUOUS TRAINING LEVEL REQUIREMENTS--(Paid Coaches)**

After completion of the beginning coach level, during each subsequent three (3) year period of coaching, must obtain a minimum of fifteen (15) coaches education hours of approved coaches standards courses selected or prescribed by the employing school district shall be completed by all coaches.

A. An individual who has earned a Physical Education major or minor and/or a Coaching major or is considered to have completed the WIAA Beginning Coach Level requirements and shall only be required to meet the Continuous Training Level.

B. An individual who coached 5 of 7 years prior to the 1994-95 school year, a cheer coach prior to the 1996-97 school year, or a dance-drill coach prior to the 1998-99 school year, shall be grand-fathered and is considered to have completed the WIAA Beginning Coach level requirements shall only be required to meet the Continuous Training level.

23.4.0 PROGRESSIVE LEVELS OF COACHING STANDARDS- (OPTIONAL STATUS)

Should an individual wish to work toward professional fulfillment in the coaching profession, he/she must earn 60 coaches education hours and have four (4) years of interscholastic coaching experience for the experienced coach level, and 90 clock hours and have six (6) years of interscholastic coaching experience for the preferred coach level.

23.4.1 EXPERIENCED COACH STANDARD (Optional status)

- A. Four years of interscholastic coaching, and a total of sixty (60) coaches education hours shall be completed from three (3) or more of the Coaching education areas. (Additional 30 course hours beyond Beginning Coach Standards).
- B. Demonstrate understanding and knowledge of School District and WIAA Interscholastic Activities policies.

23.4.2 PREFERRED COACH STANDARD (Optional status)

- A. Six (6) years of interscholastic coaching and a total of ninety (90) coaches education hours shall be completed with a minimum of six (6) hours from each of the five coaches education categories listed below. (Additional 30 hours beyond the Experienced Coach level.)
- B. Demonstrate understanding and knowledge of School District and WIAA Interscholastic Activities policies.

23.5.0 COACHES EDUCATION CATEGORIES (Knowledge and Skills)

- A. Medical aspects of coaching - Health and Welfare
 - 1. Care and Prevention of student injury
 - a. First Aid
 - b. CPR Certification
 - c. Athletic Training/Sports Medicine
 - d. Chemical and Substance Abuse
 - e. Injury Rehabilitation
 - 2. Kinesiology
 - 3. Exercise Physiology
- B. Legal Aspects of Coaching - Litigation, Liability
 - 1. School Physical Education, Sports, or Athletic Law
 - 2. Annual review of rule changes and application of rules
 - 3. School Board Policies, WIAA Rules, School Law
- C. Psycho/Social Foundations
 - 1. Sociology and Psychology of Sports (adolescent psychology, sports sociology and psychology, motivation, dealing with substance abuse.)
 - 2. Philosophy of Interscholastic Activities Programs
- D. Coaching Techniques
 - 1. Instructional methods in physical education/activities
 - 2. Instructional methods in physical education for handicapped
 - 3. Instructional methods in interscholastic sports
- E. Philosophy/Sports Management/Pedagogy

23.5.1 Providers of clock hours - Upon WIAA approval of course outline and instructor, coaching education clock hours may be obtained from an accredited university or college, WIAA-approved offering or an OSPI named provider.

23.6.0 **COACHES EDUCATION COMPLIANCE** Each school year, schools will report coaching standards compliance for all paid and/or volunteer coaches, at both the high school and middle school levels. A school will be in compliance if eighty percent (80%) of their coaches meet coaching education standards. A school will provide a plan of action to have all coaches in coaching education compliance.

- A. First year of non-compliance, a school is placed on probation for one year and a letter is sent to the school's Superintendent, Principal and Athletic Director.
- B. Second year of non-compliance, schools are required to meet with the Regional Facilitator and WIAA Staff to develop a compliance plan that may include mandatory attendance at the WIAA Coaches School or completion of the NFHS Coaching Principles Course.
- C. Third year of non-compliance, leagues/WIAA Districts/WIAA Executive Board action could include loss of right to participate in post-season play.

- 23.7.0 SHARED COACHING** - The WIAA Executive Director may approve shared coaching in diving, pole vaulting and gymnastics that have been determined to pose a safety or health concern for student athletes due to the qualifications or lack thereof of available coaching staff. Prior to approval the following criteria must be documented or verified to the Executive Director by the requesting member school:
- A. The requesting school district has determined no qualified coaching is available, and the shared coach is qualified and approved (employed) by the local school district in compliance with Coaching Standards as set forth by the WIAA.
 - B. The "specialized" program must be made available to all athletes in that event (e.g., under the safety purposes of this permissive rule, if a school sends one pole vaulter to a shared coach, the school must send all pole vaulters from the school).
 - C. Coaching will be only during the WIAA adopted season for the sport.
 - D. Approval must be requested with each two (2) year classification period.

23.8.0 NEGATIVE COMMENTARY/BY COACHES AND/OR OFFICIALS - The WIAA prohibits negative commentary or statements to the media or general public in any form relative to officiating prior to, during, or following any interscholastic activity or athletic event. This rule applies equally to members of the Washington Officials Association relative to coaching tactics or administrative responsibilities.