

**RETURN COMPLETED TO: JIM LEPI, ATHLETIC DIRECTOR**  
(drop in Gold Mail Slot on Red Barn on St. Ambrose property)

**ST. AMBROSE ATHLETIC BOOSTERS**  
**COACH/PROGRAM DIRECTOR APPLICATION FORM**

**Sport Year Season:** \_\_\_\_\_ **Sport Program:** \_\_\_\_\_

**Position Applying for:** \_\_\_\_\_ **Grade:** \_\_\_\_\_  
**Your Parish:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_  
**Address/City/Zipcode:** \_\_\_\_\_

**Phone(H):** \_\_\_\_\_ **Phone(W):** \_\_\_\_\_  
**Email:** \_\_\_\_\_

**Are you over 18 years of age?** \_\_\_\_\_ **If not what is your age:** \_\_\_\_\_

**Are you a certified CYO coach?** \_\_\_\_\_ **Month/Year:** \_\_\_\_\_  
(6 hour orientation training through CYO Athletic Department)

**Have you attend the Diocese's MANDATORY Protecting God's Children Awareness Training (VIRTUS)?** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**If yes, is your signed copy on file at the parish of Policy For the Safety of Children in Matters of Sexual Abuse- Revised 2007?** \_\_\_\_\_

**Have you had a background check/fingerprinting performed?** \_\_\_\_\_  
**Date:** \_\_\_\_\_ **Where:** \_\_\_\_\_  
**If yes, please attach a copy of the documentation of results**

**Do you have children in ST. Ambrose Athletic Boosters sport programs?** \_\_\_\_\_

**Have you coached Catholic Youth Sports or other youth sports?** \_\_\_\_\_  
**If yes, list sports, organizations, positions and years:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Have you ever been disciplined or removed by another parish, program or organization?\_\_\_\_\_ If yes, please explain:\_\_\_\_\_**

\_\_\_\_\_  
\_\_\_\_\_

**References (Name and phone number)**

**1.** \_\_\_\_\_

**2.** \_\_\_\_\_

**By my signature below, I certify that the above answers are accurate and true to the best of my knowledge. I agree to abide by the Boosters Constitution, CYO Athletic Department rules and league rules in the execution of coaching/program director duties. I will comply with the Code of Conduct of the Boosters and CYO. I understand that to coach/direct, I must be approved by the Boosters Executive Board and required to attend Virtus training, have a background check along with fingerprinting performed and attend a CYO required 6 hour coaches' orientation training prior to becoming a coach/director. I grant my permission to release results of information obtained during my application process to St. Ambrose Parish and/or Diocese of Cleveland, as required. I understand that as a volunteer coach, the Boosters have the right to end my coaching/directing position as deemed, despite satisfactory performance.**

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**Signature:\_\_\_\_\_Date:\_\_\_\_\_**

**R 4-08**