

MONTVILLE TOWNSHIP RECREATION DEPARTMENT YOUTH SPORTS COACHES CONTRACT

Thank you for volunteering to be a coach, manager or assistant in one of Montville Township's Recreation Programs. In order to be considered as a volunteer, you need to complete three items as follows:

1. Youth Sports Coaches Contract (Code of Ethics)
2. Disclosure Statement (Background Check) see pages 1 and 2
3. Completion of a Montville Township Approved "Sports Certification Program"

Upon completion of the requirements above, the approval of the Montville Township Recreation Department and the sports organization for which you have applied, you will then be considered as a volunteer. Each coach/assistant must wear an ID Badge. No person will be allowed on the field without the proper ID.

YOUTH COACHES CODE OF ETHICS

- I hereby pledge to live up to my certification as a coach by following the Code of Ethics.
- I will place the emotional and physical well being of all players ahead of any personal desire to win.
- I will remember to treat each player as an individual, remembering the large range of emotional and physical development within a particular age group.
- I will do my very best to provide a safe playing situation for my players
- I promise to review and practice the necessary first aid principles needed to treat injuries of my players
- I will do my best to organize practices that are fun and challenging for all my players
- I will lead by example in demonstrating fair play and sportsmanship to all players.
- I insure that I am knowledgeable in the rules of each sport that I coach, and will teach these rules to my players
- I will use coaching techniques appropriate for each of the skills that I teach and for the proper age level
- I will remember that I am a youth coach that the game is for the children and not adults.

I, (please print first & last name) _____, verify that I have read and understand the Youth Sports Coaches Contract. I agree to abide by all the rules, regulations and policies set forth by the Montville Township Recreation Department and the organization of which I am involved. I also understand if I violate and/or break any of the rules, regulations or policies I may lose the privilege of coaching, managing or assisting in any program sponsored by the Montville Township Recreation Department.

Please complete all of the following information, print neatly, all UPPER CASE letters with a black pen.

FIRST NAME:	MIDDLE INITIAL:	LAST NAME:
ADDRESS:		
CITY		EXPIRATION
PHONE # :		Coach ID#

SIGNATURE:

DATE:

NOTE: Sport organizations will be fined accordingly for coach's non-compliance of wearing their coach's ID. FIRST offense \$50.00, SECOND offense \$75.00 and THIRD offense will be suspension from the season. It is the responsibility of the sponsoring sport organization to ensure that coaches wear their ID cards.

Montville Township Recreation Athletic Code of Conduct

The following is promulgated in accordance with the provisions of State of New Jersey P.L. 2002, Chapter 74.

PREAMBLE: Interscholastic and youth sports programs play an important role in promoting the physical, social and emotional development of children. It is therefore essential for parents, coaches and officials to encourage youth athletes to embrace the values of good sportsmanship. Moreover, adults involved in youth sports events should be models of good sportsmanship and should lead by example by demonstrating fairness, respect and self-control.

I therefore pledge to be responsible for my words and actions while attending, coaching, officiating or participating in a youth sports event and shall conform my behavior to the following code of conduct:

1. I will not engage in unsportsmanlike conduct with any coach, parent, player, participant, official or other attendee
2. I will not encourage my child, or any other person, to engage in unsportsmanlike conduct with any coach, parent, player, participant, official or any other attendee.
3. I will not engage in any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant, official or any other attendee.
4. I will not encourage my child, or any other person, to engage in any behavior which would endanger the health, safety or well-being of any coach, parent, player, participant, official or any other attendee.
5. I will not use drugs or alcohol while at a youth sports event and will not attend, coach, officiate or participate in a youth sports event while under the influence of drugs or alcohol
6. I will not permit my child, or encourage any other person, to use drugs or alcohol at a youth sports event and will not permit my child, or encourage any other person, to attend, coach, officiate or participate in a youth sports event while under the influence of drugs or alcohol.
7. I will not engage in the use of profanity.
8. I will not encourage my child, or any other person, to engage in the use of profanity.
9. I will treat any coach, parent, player, participant, official or any other attendee with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
10. I will encourage my child to treat any coach, parent, player, participant, official or any other attendee with respect regardless of race, creed, color, national origin, sex, sexual orientation or ability.
11. I will not engage in verbal or physical threats or abuse aimed at any coach, parent, player, participant, official or any other attendee.
12. I will not encourage my child, or any other person, to engage in verbal or physical threats or abuse aimed at any coach, parent, player, participant, official or any other attendee.
13. I will not initiate a fight or scuffle with any coach, parent, player, participant, official or any other attendee.
14. I will not encourage my child, or any other person, to initiate a fight or scuffle with any coach, parent, player, participant, official or any other attendee.
15. I will not encourage my child, or any other person, to engage in any property damage.
16. Failing to abide by a league/organization rules for minimum playing time required for each player.

I hereby agree that if I fail to conform my conduct to the foregoing while attending, coaching, officiating or participating in a youth sports event I will be subject to disciplinary action, including but not limited to the following in any order or combination, and possibly be banned as described in provision P.L. 2002, chapter 74:

1. Verbal warning issued by a league, organization or school official.
2. Written warning issued by a league, organization or school official.
3. Suspension or immediate ejection from a youth sports event issued by a league, organization or school official who is authorized to issue such suspension or ejection by a school board or youth sports organization.
4. Suspension from multiple youth sports events issued by a league, organization or school official who is authorized to issue such suspension by a school board or youth sports organization.
5. Season suspension or multiple season suspension issued by a school board or youth sports organization.

N.J.S.A. 5:17-4 VIOLATION OF CODE OF CONDUCT: Any student, coach, official, parent or other person subject to the terms and condition of an athletic Code of Conduct established pursuant to the provisions of P.L. 2002, c. 74 (C 5:17-1 et seq.) who violates the provisions of the athletic code of conduct, may be banned from attending any subsequent school or community sponsored youth sports event. In the event that any student, coach, official parent or other person subject to the terms and conditions of an athletic code of conduct is banned from attendance, that person may petition the school board or sports team for permission to resume attendance. Prior to being permitted to resume attendance, the school board or sports team shall require the individual to present proof of completion of anger management counseling through a public or private source.

Signature: _____

Date _____

Name (please print) _____

New Jersey Universal Fingerprint Form Appointment Instructions

TO REGISTER FOR AN APPOINTMENT ONLINE GO TO

<https://uenroll.identogo.com/>

1. PAGE 1: SCHEDULE OR MANAGE APPOINTMENT
ENTER SERVICE CODE TO GET STARTER: **2F1J3Y**
2. PAGE 2: ENTER THE REQUIRED PERSONAL INFORMATION: LEGAL NAME, DATE OF BIRTH AND METHOD OF CONTACT
3. PAGE 3: AGENCY IDENTIFIERS: **P03017** (1 LETTER **P**, 5 NUMBER STARTING WITH **ZERO**)
4. PAGE 4: CITIZENSHIP: COUNTRY OF BIRTH, CITY OF BIRTH, STATE/PROVINCE OF BIRTH AND COUNTRY OF CITIZENSHIP
5. PAGE 5: PERSONAL QUESTIONS: 1) HAVE YOU EVER USED AN ALIAS. 2) IS YOUR MAILING ADDRESS THE SAME AS YOUR RESIDENTIAL ADDRESS
6. PAGE 6: PERSONAL INFORMATION: HEIGHT, WEIGHT, HAIR COLOR, EYE COLOR, PREFERRED LANGUAGE, GENDER AND RACE
7. PAGE 7: MAILING ADDRESS: COUNTRY, ADDRESS LINE 1, CITY, STATE, PROVINCE, POSTAL CODE
8. PAGE 8: SELECT DOCUMENTS THAT YOU WILL BRING
9. PAGE 9: ENTER ZIP CODE FOR LOCATION OF IDENTOGO
10. PAGE 10: SELECT DATE AND TIME OF APPOINTMENT. IF YOU SEE "0 AVAILABLE APPOINTMENTS", NOTE THAT IT SAYS "IN THE NEXT 7 DAYS." CLICK ON THE LOCATION FOR MORE AVAILABLE DATES TO LOAD IN THE DROP DOWN MENU. **PAYMENT SHOULD BE \$24.05**
11. PLEASE BRING YOUR COMPLETED FINGERPRINT FORM TO YOUR APPOINTMENT.

Notification Period and Reimbursement - Recreation usually receives notification from the state 7-10 business days after your prints have been taken. (Due to limited staffing during the pandemic, responses are currently taking up to a month.) To expedite this process once you complete your fingerprinting please immediately return the completed Youth Sports Coaches Contract/ID Badge form, the fingerprint application, receipt and reimbursement voucher to the Recreation Director. A check reimbursement takes 2-4 weeks which will be mailed to your home.

The youth sports coach contract / ID BADGE form must be completed and returned to the Recreation Director to process a new badge. Once all certifications are met, your badge will be mailed to your home address and must be worn at all practices/games.

If you have any questions or need help with this process please email Ldent@montvillenj.org or call 973-331-3344.

(1) Originating Agency Number (ORI #) NJ920610Z		(2) Category YSB		(3) Statute Number 15A:3A-1	
(4) Reason for Fingerprinting YOUTH SERVING ORGANIZATION VOLUNTEER			(5) Document Type VB1		(6) Payment Information \$24.05
(7) Contributor's Case # (Unique Identifier)			(8) Miscellaneous		
(9) First Name		(10) MI	(11) Last Name		
(12) Daytime Phone Number () -		(13) Social Security Number (Optional)		(14) Date of Birth	(15) Height
(17) Maiden or Alias Last Name		(18) Place of Birth (US State if US Citizen; Country for all others)			(19) Country of Citizenship
(20) Home Address					
Address		City		State	Zip
(21) Gender (Select one) <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Both		(22) Hair Color	(23) Eye Color	(24) Race (Select One) <input type="checkbox"/> A Asian/ Pacific Islander (includes Asian Indian) <input type="checkbox"/> B Black <input type="checkbox"/> I American Indian / Alaska Native <input type="checkbox"/> W White (Includes Hispanic/ Spanish Origin) <input type="checkbox"/> U Unknown	
(25) Occupation / Position (with respect to Requirement)		(26) Employer / Organization Name (with respect to Requirement)			
		Employer Address			
		City		State	Zip
Identification Requirement - Acceptable Identification must be presented at the <u>time of printing</u> . Identification presented MUST be one (1) document that is current (not expired). A combination of documents will not be accepted. The single document must include the following criteria: Photo, Name, Address (home/Issuing agency), Date of Birth. Acceptable ID must be issued by a Federal, State, County or Municipal entity for identification purposes. Examples of acceptable ID are: 1) Valid U.S. State Photo Driver's License/ Non Driver's License, 2) U.S. Passport, 3) USCIS Permanent Resident ID Card (issued after 5/10/2010), and 4) USCIS Employment Authorization Card (issued after 10/31/2011).					

Please READ This Form Carefully:

Follow all of the instructions provided by your agency/employer to complete the fingerprint process. You must have this form (Blocks 1 through 26) completed prior to scheduling your fingerprint appointment via the website or call center. **PLEASE PRINT LEGIBLY.** It is **required** that you **present** this completed Universal Fingerprint Form, IDG_NJAPP_051719_V1, at your scheduled appointment.

Appointment Scheduling:

Scheduling is available anytime at www.bioapplicant.com/nj. Appointments may also be scheduled through our Call Center. English and Spanish speaking agents are available at **1-877-503-5981**, Monday through Friday, 8:00AM to 5:00PM EST and Saturday, 8:00AM to 12 Noon EST.

Payment:

When an applicant is responsible for payment, payment is required at the time of scheduling. The following forms of payment are accepted: Visa, MasterCard, American Express, Discover and prepaid debit cards, or electronic debit (ACH) from a checking account. Accounts will be debited immediately.

Cancel/ Reschedule:

Appointments may be canceled or rescheduled via the website or the call center **before the deadline of 5PM EST** the business day prior to the scheduled appointment (Saturday Noon for Monday appointments). An appointment fee of \$12.00 plus tax (\$12.80) will be incurred by applicants who do not cancel/reschedule their appointment prior to the deadline. Idemia Identity & Security will refund the remainder of the fee paid (state/federal search fees) to the original payment method.

Unable to be Fingerprinted:

An applicant is considered "Unable to be Fingerprinted" for any of the following reasons: Failure to appear for scheduled appointment, inability to present proper identification, inability to present this completed Universal Fingerprint Form IDG_NJAPP_051719_V1, or the information on this form does not exactly match the information provided during the scheduling process. Applicants unable to be fingerprinted will incur a \$12.00 plus tax (\$12.80) appointment fee. Idemia Identity & Security will refund the remainder of the fee paid (state/federal search fees) to the original payment method.

PCN and Receipts:

Upon the completion of fingerprinting you will be assigned a PCN number. The PCN will be recorded on this form and on your receipt. Idemia Identity & Security will not provide *duplicate receipts, PCN Numbers or any appointment/printing information after the time of printing.*

Applicant ID Number:	Payment Authorization:	PCN:
Scheduled Day & Date:	Scheduled Time:	Scheduled Site:
Agency Information:		

You **MUST** retain a copy of this form and the receipt of printing for your personal records.

APPLICANTS MUST NOT ALTER, SHARE, OR REUSE THIS FORM

