



# New Jersey Youth Soccer

## EMPLOYMENT/VOLUNTEER DISCLOSURE STATEMENT

Pinelanders Youth Soccer Club  
Howell, NJ

-- NOT REQUIRED --

Social Security Number

First Name & Initial

Last Name

Address (No PO Box Address)

Town

State

Zip Code

( )

Home Phone

( )

Business Phone

Date of Birth

Coaching License

US Soccer Referee Grade

State

-- NOT REQUIRED --

Drivers License Number

N/A

State

N/A

Expiration

1. Background in work with youth      Position \_\_\_\_\_      Year(s) \_\_\_\_\_
2. Experience in soccer      Position \_\_\_\_\_      Year(s) \_\_\_\_\_
3. Experience in youth soccer      Position \_\_\_\_\_      Year(s) \_\_\_\_\_
4. Previous residence(s)      City \_\_\_\_\_      State \_\_\_\_\_  
(for last 5 years)
5. Have you ever been convicted of a  
crime or disorderly person offense? If  
yes, please explain (Use back of form  
if necessary)       Yes       No
6. Have you ever been convicted of a  
crime against a person? If yes please  
explain (Use back of form if  
necessary)       Yes       No

I understand that:

- a. It is the intent of New Jersey Youth Soccer to deny certification to any person who has been convicted of a crime of violence or a crime against a person.
- b. This disclosure statement must be updated at least every year.

Signature

Printed Name

Date

**THIS FORM IS TO BE HANDED IN TO YOUR CLUB'S KIDSAFE COORDINATOR**