



Dixie Youth Baseball

of West Monroe, Inc.

League: _____

TO: Ouachita Parish Sheriff Office:

The applicant listed below has applied to coach within our organization. As a part of our policies, we are requesting a check of all coaches' arrest records to determine if the applicant has been convicted of any state, parish or municipal violations. By his/her signature, he/she has given permission for the release of the requested information. All information will be held in strict confidence between the Executive Board of Dixie Youth Baseball/Softball of West Monroe and the applicant.

APPLICANT INFORMATION (MUST PRINT OR TYPE CLEARLY)

LAST NAME: _____ FIRST NAME: _____ MI _____

DATE OF BIRTH: ____/____/____ SSN: _____-____-_____

ADDRESS: _____

CITY: _____ STATE _____ ZIP _____

RACE: _____ SEX: MALE OR FEMALE (CIRCLE ONE)

Have you ever been convicted of any parish, state or municipal violations? Yes No

List each violation: _____
_____ (Use back of form is necessary)

By my signature below, I authorize the release of my arrest record, if any, and waive such legal rights that may exist and do release any and all person(s) fro liability in connection with the furnishing of such information. I understand that if I fail to release such information that i may not be authorized to coach within the Dixie Youth Baseball/Softball of West Monroe Organization.

Applicants Signature

Date

Applicant, do not write below this line

| <u>Date of Arrest</u> | <u>Charge</u> | <u>Disposition</u> |
|-----------------------|---------------|--------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Signature- OPSO

Date