



Youth Sports League  
Coach Background Check Verification Form  
Organization(s)

Name of Organization \_\_\_\_\_  
*\*Organization must be a 501(c)(3) Non Profit*

Coach's Name (First Name, Middle Initial, and Last Name) \_\_\_\_\_

Pennsylvania Child Abuse Clearance \_\_\_\_\_ (Date of Completion)

Pennsylvania State Police Criminal Background Check \_\_\_\_\_ (Date of Completion)

FBI Fingerprint Criminal Background Check \_\_\_\_\_ (Date of Completion)

*\* Only required if you do not meet the exemption requirements in section 6344.2 of the Commonwealth Child Protective Services Law. To find out if you are exempt, visit:*  
[http://keepkidssafe.pa.gov/cs/groups/webcontent/documents/document/c\\_135249.pdf](http://keepkidssafe.pa.gov/cs/groups/webcontent/documents/document/c_135249.pdf)

\_\_\_\_\_ Unless Exempt, I certify that the youth basketball coach listed above has completed the required background checks in compliance with sections 6344 and 6344.2 of the Commonwealth Child Protective Services Law.

\_\_\_\_\_ I understand that the City of Allentown Parks and Recreation Department reserves the right to request copies of completed clearances at any point in time. Copies of clearances must be provided to the Recreation Office upon demand.

\_\_\_\_\_ I understand that failure to comply with these requirements will result in the inability of an individual coach and the organization from participating in the City of Allentown Parks and Recreation Department Youth Sports Leagues until compliance is met.

\_\_\_\_\_ Print Name \_\_\_\_\_ Title

\_\_\_\_\_ Signature \_\_\_\_\_ Date

**OFFICE USE ONLY**

\_\_\_\_\_ **Date Received** \_\_\_\_\_ **Date Verified** \_\_\_\_\_ **Verified By**