



New Jersey Youth Soccer  
**EMPLOYMENT/VOLUNTEER  
DISCLOSURE STATEMENT**

_____	_____	_____
First Name & Initial	Last Name	Social Security Number
_____	_____	_____
Address	Town	State and Zip code
( ) _____	( ) _____	_____
Home Phone	Business Phone	Date of Birth
_____	_____	_____
Coaching License	Referee Grade	State
_____	_____	_____
Drivers License Number	State	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) (for last 5 years)   | City_____                    | State_____                  |
| 5. Have you ever been convicted of a crime or disorderly person offense? If yes, please explain (Use back of form if necessary) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6. Have you ever been convicted of a crime against a person? If yes please explain (Use back of form if necessary)              | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

I understand that:

- 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.
- 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**