



Okemos Youth Basketball Volunteer Coach Application – 2016/17

ALL ITEMS MUST BE COMPLETED FOR APPLICATION TO BE ACCEPTED FOR NEW COACHES
RETURNING COACHES MAY COMPLETE THE HIGHLIGHTED SECTIONS ONLY.

All coaches must have on file with Community Education:

- Their Certificate of Completion of the CDC online Concussion Awareness Training, and
- Current school year Okemos Public Schools Volunteer Conviction Disclosure/Consent to Criminal History Search with a copy of their driver's license

Please Check:	☐ Grade Level	☒ Boys	☐ Girls
	☒ Competitive	☐ Recreational	☐ Both
	☐ Head Coach	☒ Assistant Coach	

Home Phone 517-927-4570 E-mail mike@thesportsflash.com

Name Michael Joseph Sinnott
First, Middle, Last

Address 4860 Olmsted, Okemos, MI 48864
Street, City, State, Zip

Work Phone 517 – 927 - 4570 Child's Name Max Sinnott

Cell Phone 517 - 927 - 4570

Coaching experience Okemos Soccer Club - 2 years League/Division WSSL

Coaching experience Williamston Soccer Club – 1 year League/Division CASL

Meridian Township Parks & Recreation/Okemos Community Ed - Tee-Ball, Baseball, Flag Football, Basketball, Soccer

If signing up as a Head Coach, please complete the following Assistant Coach info:

You are only allowed to designate ONE assistant coach. They must also provide an application.

Assistant Coach Name _____ Child's Name _____

Home Phone _____

Please list / describe any coaching and teaching experience or training.

I hold two US Soccer Federation licenses to coach youth soccer.

I have completed USSF "E" and "F" licenses. Expected to complete my USSF

"D" license course in November 2016. The methodology of teaching soccer can be applied to other sports

Please write a few sentences regarding your philosophy on coaching youth sports.

Process is more important than outcomes. Fundamental skill development is critical to enjoying the game

Through sports we can teach young people many skills that will help them to find successful in life.

Please indicate reason(s) for wanting to volunteer as a coach?

I want to help my son and his teammates learn the game of basketball.

What interests you about this position?

I am interested in helping young people learn the fundamentals of the game.

Please continue to other side

**THANK YOU FOR BEING WILLING TO VOLUNTEER AS A COACH!
WE DEPEND UPON VOLUTEERS LIKE YOU!**

List any formal training you have received in first aid

20+ years ago, I was a firefighter/EMT.

Although not currently certified, I have basic skills to treat minor injuries.

References (List 3 not related)

Name Jerome Tandoc Phone Number 517-282-6702

Address _____

Street, City, State, Zip

Rob Antcliff 517-281-7333

Name _____ Phone Number _____

Address _____

Street, City, State, Zip

Courtney Schnelker 517-285-3241

Name _____ Phone Number _____

Address _____

Street, City, State, Zip

Okemos Community Education strongly believes in the benefits of participation in organized sports. Participation in sports has proven to build self-esteem, promote teamwork, develop the body as well as the mind, and is an integral part of the maturation process. Therefore, the Okemos Community Education mission is to provide a youth sports program oriented toward providing a healthy recreational and social learning experience for children, with emphasis being placed on learning, fun and sportsmanship rather than competitive attitudes.

- I will hold a minimum of two (competitive) or one (recreational) practice(s) per week during the regular season,
- I promise to communicate with my players and parents in a timely and responsible fashion,
- I promise to follow the OCE Concussion Guidelines to the best of my ability,
- I promise to behave in a professional and courteous manner to all I come in contact with in conjunction with coaching through Okemos Community Education Basketball.

Signing below indicates that you will uphold the Okemos Community Education youth sports Philosophy.

Signature

Date

Please complete and turn into Community Education via:

- **Fax:** 517-349-6643, or
- **E-mail** to brian.dunn@okemosk12.net, or
- **Mail or hand-deliver** to:
Okemos Community Education, 1826 Osage, Okemos MI. 48864
(Okemos Childcare Building/Edgewood Elementary)

Attach your: 1) Certificate of CDC online Concussion Awareness Training;
2) Driver's License copy; and
3) Your completed current school year Okemos Public Schools Volunteer/Chaperone Conviction Disclosure/Consent to Criminal History Search Form

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Okemos Public Schools
Volunteer/Chaperone Conviction Disclosure/Consent to Criminal History Search Form
All information will be treated as confidential

As a prospective volunteer/chaperone of Okemos Public Schools, I understand that it is this districts policy to secure conviction criminal history information by using the information provided below as part of the screening process for volunteers/chaperones.

Name (Please Print): Sinnott MICHAEL JOSEPH
Last First Middle

Maiden Name/Names Previously Used: _____

School Student Attends: Kinawa Teacher(s): Pruden

Date of Birth: 4/1/74 Gender: MALE

Race (please circle one): Caucasian African-American Hispanic Other

Michigan Driver's License Number: S 530 603 441 258
Must provide a copy of a State of Michigan Driver's License upon return of this form to be considered.

Description of Volunteer/Chaperone Work: BASKETBALL COACH

Check all that apply:

- ☒ 1. I have not been convicted of, or pled guilty or nolo contendere (no contest) to any crime.
- ☐ 2. I have been convicted of, or pled guilty or nolo contendere (no contest) to the following crimes (attach separate statement to explain the criminal offense, date, court, city/state, and circumstances surrounding the conviction):
- | | | |
|--------------------------|--------------------------|--------------------|
| ☐ | ☐ | Felony Misdemeanor |
| ☐ | ☐ | Felony Misdemeanor |
3. ☐ I am the subject of a current criminal investigation or have pending charges against me? (Attach separate statement to explain the investigation or pending charges)

In signing this form, I understand and agree that:

If I have been convicted of a "listed offense", as defined by Michigan law, I will not be allowed to volunteer for Okemos Public Schools. I also understand that if I have been convicted of a felony or misdemeanor, other than a listed offense, the superintendent or designee will review the conviction, and consider it in relationship to the specific aspects of volunteering/chaperoning.

I certify that the information contained in this form is correct to the best of my knowledge. I understand that making any misleading or untruthful statements on this form may result in my being disqualified from consideration as a volunteer/chaperone at Okemos Public Schools.

The above information is required by the Central Records Division of the Michigan State Police, Lansing, Michigan. I authorize Okemos Public Schools to use the above information for the sole purpose of obtaining a conviction-only criminal history file search.

This volunteer conviction disclosure form is valid for one (1) school year.

MICHAEL Sinnott 10/12/16
Signature Date

OFFICE USE ONLY:

Approved ☐ Denied ☐ Date Approved/Denied _____ Determining Staff Member Initials _____

MICHIGAN MI USA

DRIVER LICENSE



S 530 603 441 258
DOB 04-01-1974

ISS 03-31-2015
EXP 04-01-2019 040174

MICHAEL JOSEPH SINNOTT
1516 LYTELL JOHNES PATH
WILLIAMSTON, MI 48895-9217

Sex M Hgt 604 Eyes BLU
Lic Type 0 End NONE

Restrictions Corrective Lens

Michael Sinnott

DD: 0000716400830

Rev 01-21-2011

S83060344126819740401190401



☐ MEDICAL
ALERT
ENCODED DATA: BIRTH,
EXPIRATION, REVISION
& TRANSACTION DATES;
D/JD CARD #: NAME;
ADDRESS; GENDER;
ISSUING STATE &
INVENTORY
CONTROL #.

04-01-1974

MI



4860 OLMSTED
OKEMOS MI 48864-1280

02/22/2016

Card does not contain name & frequency information (for use only)



This is to certify that

Michael Sinnott

Congratulations on Completing Concussion Education - Dr.
Reuben Echemendia

Presented to:
Michael Sinnott

Concussion Education - Dr. Reuben
Echemendia

Certified by:
Andy Sevcik

June 14, 2015

