



AUTHORIZATION FOR BACKGROUND CHECK

Please read and sign this form in the space provided below. Your written authorization is necessary for coaching purposes.

I, _____, hereby authorize Palo Duro Soccer Association to investigate my background and qualifications for purposes of evaluating whether I am qualified for the position for which I am applying. I understand that Palo Duro Soccer Association will utilize an outside firm or firms to assist it in checking such information, and I specifically authorize such an investigation by information services and outside entities of the organization's choice. I also understand that I may withhold my permission and that in such a case, no investigation will be done, and my application for coaching will not be processed further.

Signature of Coach

Date

Name (please print)

Physical Address (street, city, state & zip)