## New Holstein Rec Youth Baseball/Softball Umpire Application

Due on or before March 22, 2020.

Please deliver to Jeff Schroeder, New Holstein Baseball/Softball Director, either in person or to the City Clerk's office.

Complete both the application form and the criminal background check form.

Thank you for your interest in sharing your talents for youth baseball and softball in our community.

Again this year: no employment paperwork for the city. You will be paid cash after completing your game.

Umpire meeting: Wednesday 4/22/20 at New Holstein Community Center. More information to come.

## <u>Umpire requirements:</u>

Minors-two for each game with one behind home plate and one on bases; must be age 14 with adequate sport knowledge

Little League-two for each game with one behind home plate and one on bases; must have one at least age 16 and one at least age 18

Graders-two for each game with one behind home plate and one on bases; must be age 18 and/or have WIAA umpire certification

Boys High School League - two for each game with one behind the plate and one on the bases; must be age 18 and the home plate umpire must be WIAA certified

Girls A-two for each game with one behind home plate and one on bases; must be age 16

Girls B-two for each game with one behind home plate and one on bases; must be age 16

# 2020 Youth Baseball/Softball Umpire Application Form

- All umpires are required to complete a background check with the City of New Holstein every 12 months.
   Misrepresentation or omission of pertinent facts may be cause for rejection.
- All umpires are required to complete an umpire application prior to the start of each season. Umpires will
  then be chosen based on qualifications and past experiences. Not all who apply are guaranteed to be
  chosen.
- The Program Director reserves the right to eject, suspend, terminate, not invite back, prosecute, or render any type of disciplinary action as deemed necessary, due to inappropriate behaviors, poor sportsmanship, and/or for any other reason.

NAME:		
STREET ADDRESS:		
CITY:	STATE:	ZIP CODE:
HOME PHONE:	CELL PHONE:	AGE:
EMAIL:		
Sport interested in	umping:	
( ) Boy's baseball		
( ) Girl's softball		
( ) both		
What do you think wou	ld make you a good choice	as a youth baseball/softball umpire?
Have you officiated you	uth sports before? ()N	o () Yes, describe sport and age level:

Have you played baseball or softball as a y experiences:	vouth or adult? ( ) No  ( ) Yes, describe
Check any of the following that apply to ye	ou
Have attended baseball or softball	umpire clinics or training
<ul> <li>Officiate for WIAA or equivalent,</li> </ul>	and hold certification
( ) baseball ( ) softba	ll () both
List 2 people who will provide character reskills and sport knowledge:	eferences and information to support your officiating
NAME:	PHONE:
NAME:	PHONE:

INFORMATION RELEASE AUTHORIZATION
Background Check for Official Use by Authorized Persons - City of New Holstein

### **INSTRUCTIONS TO APPLICANT:**

The City of New Holstein requests this information to complete the employment background verification. The information obtained is used exclusively for the purpose of employment consideration. Failure to complete will result in delayed processing of your application.

Legal Name: Last, First, Middle	Date of Birth
Resident Street Address	
(Area Code) Home Telephone	(Area Code) Work Telephone
Former Name (If Applicable)	
pertaining to me and my personal background whether such inforr from any or all of the following sources:  Military Record Centers Any place of business Any Court, Police Agency or other location where crimina Former Employer(s) Present Employer(s) Any School, College, University or other educational insticted to Credit Bureau(s) Any Banking Institution Any Local, State, or Federal Governmental Agency Any private citizen who has knowledge of individual  understand that any information obtained by the personal histopart, upon this release authorization will be considered in determ that the refusal to grant this authorization will not, of itself, co institution, including its officers, employees, or related personnel,	ory background investigation which is developed directly or indirectly, in whole or indiring my suitability for employment by The City of New Holstein. I fully understand postitute a basis for rejection of my application. I hereby release any individual or, both individually and collectively, from any and all liability for damages of whatevees (the Privacy Act) which may at any time result to me, my heirs, family or associates
A photocopy of this release will be as valid as an original.	
Applicants Signature:	Date:
Parent/Guardian Signature:	Date:
OFFICE USE ONLY: Background Check Completed By: Recommendation on the results of the background check is that Denial is recommended based on the following information:	it this applicant should be (circle one): APPROVED DENIED