



CLASS A VOLUNTEER INFORMATION SHEET

****Class A Volunteer includes Heads of Delegations (HOD), Coaches, Adult Unified Partners (18+), Volunteers that help at each practice (parents/paras/anyone that has one on one contact with Athletes on a consistent basis)**

CHECKLIST FOR NEW/EXPIRED CLASS A VOLUNTEERS/ADULT (18+) UNIFIED PARTNERS:

- **STEP 1 - Complete General Orientation Training (Only needs to be taken once!)**
 - Go to: <https://specialolympicsarizona.org/coaches/general-orientation/>
 - SOAZ will receive electronic notification that this training was completed.
- **STEP 2 - Complete Protective Behaviors Training (Renews every 3 years)**
 - Go to: <https://resources.specialolympics.org/protective-behaviors>
 - SOAZ will receive electronic notification that this training was completed.
 - Please email the certificate to hod@gilbertroadrunners.com.
- **STEP 3 - Complete Concussion training (Renews every 3 years)**
 - Go to: <https://nfhslearn.com/courses/concussion-in-sports-2>
 - At the website, select "Register" on the top right-hand side of the screen to set up an account and "order" the course. (There is no charge to order this course).
 - Once concussion training is complete, print off the certificate, keep a copy for your records, and send/scan/email a copy to hod@gilbertroadrunners.com.
- **STEP 4 - Complete Class A Volunteer/Unified Partner application for a background check (renews every 3 years)**
 - **Class A Volunteer/Adult Unified Partner application (18 years of age and older)**
 - An email will be sent by Sterling Volunteers on behalf of Special Olympics Arizona (SOAZ) containing a link to complete an online Class A Volunteer application for a background check. **Invitations will not be sent until all other required trainings are completed and recorded. Please note that background checks take a minimum of 72 hours to be processed and returned.**
 - **Youth Volunteer/Unified Partners that are 17 and under** - Youth under the age of 18 must complete a hard copy Youth Unified Partner application.

IMPORTANT REMINDERS:

- **Anywhere in the application process where it asks for the following, please make sure to mark**
 - For Area = Four Peaks
 - For Delegation = Gilbert Roadrunners****if the wrong information is entered, please note that it is difficult to track down the trainings that have been completed**

****Please keep a copy of all certifications and emails showing completion of trainings for your records****



Coach/Volunteer Info

Date:	
First & Last Name :	
Birth Date:	
Address:	
Phone:	
Email:	
Food Allergies:	
Allergies:	
Emergency Contact First & Last Name:	
Emergency Contact Phone Number:	
Class A Volunteer completed on:	