



**The College at Brockport Campus Recreation  
Coach/Volunteer Code of Conduct Agreement**



**The College at Brockport Mission:**

The College at Brockport is an inclusive learning community that inspires excellence through growth, engagement, and transformation.

**Vision:**

Building meaningful lives and vibrant communities.

**Values:**

Community, Engagement, Excellence, Transformation

**Campus Recreation Mission:**

Promotes student success by prioritizing student learning and development through educationally purposeful activities, leadership opportunities, and employment. We are committed to offering healthy lifestyle choices through safe quality programming to the college campus and its surrounding communities emphasizing student learning beyond the classroom.

**Your Role as a Volunteer Coach**

- Conduct safe and organized practices providing opportunities for participation to all interested students
- Successfully complete a background check with the office of human resources
- Maintain a professional coach/volunteer and player relationship with all students
- Understand the responsibility for teaching sportsmanship, basic skills and leadership
- Act in a professional manner at all times and serve as a positive role model for the students
- Understand the policies set forth in the Club Sports Member Handbook and your role in relation to those policies.(A club sport is first and foremost a student organization and is to be administered by the clubs designated officers)
- Ensure club members act according to the Club Sport Member Handbook
- Report use of illegal drugs, sexual harassment, and/or any hazing activity
- Notify the Coordinator of Intramural and Club Sports of any policy infraction in a timely manner
- Attend a volunteer coaches meeting with the Coordinator prior to the start of the semester

**The department of Campus Recreation reserves the right to discipline or terminate a volunteer/and or coach, whose actions or behavior reflect negatively on The College at Brockport and the club sports program.**

**I understand this position holds a high level of responsibility and agree to the above code of conduct.**

**Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Club:** \_\_\_\_\_

**Signature:** \_\_\_\_\_



## Club Sports

### Coach, Advisor and Volunteer Form

This form should be submitted by any individual (non-player) that would like to assist a club in any manner. This form must be on-file prior to the individual assisting the club. Failure to submit this form prior to assisting may result in the club facing disciplinary actions.

#### General Information

Name: \_\_\_\_\_ Club: \_\_\_\_\_

D.O.B \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Indicate your title within the club: \_\_\_\_\_

List your specific responsibilities within the club: \_\_\_\_\_

#### Experience

*Please list all previous experience that is relevant to your responsibilities within the club.*

Job Title: \_\_\_\_\_ Years Experience: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Job Title: \_\_\_\_\_ Years Experience: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

#### Certification

*Please list any certifications you hold that are associated with your responsibilities (including CPR, First Aid or any medical training). Also, include a copy of each certification listed below.*

✓ \_\_\_\_\_

#### Participation Statement

I understand that my involvement with the club is strictly voluntary. No form of compensation, including financial shall be made without the prior written approval of the Coordinator of Intramural and Club Sports. I understand that I am expected to abide by all laws, policies and procedures of the State, College and/or Campus Recreation. Failure to abide by laws, policies or procedures may result in termination of my responsibilities and/or referral of the situation to the proper authorities. Responsibilities may be terminated for any reason at anytime. I understand that the State, College, Brockport Student Government nor Campus Recreation provides any type of insurance or coverage (including medical) to volunteers serving as a coach, advisor or in any other capacity.

By signing below, I acknowledge that I have read the above statement, understand the entire statement and agree to the content within.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_