

**PLEASANT VALLEY SCHOOL DISTRICT**  
Brodheads ville, Pennsylvania  
**2020-2021**  
**NON-ATHLETIC TEAM ADVISOR APPLICATION**  
*(To be forwarded to Building Principal)*

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This application, is submitted by \_\_\_\_\_, for the position of Non-Athletic Team Advisor  
(Name of Applicant)  
for \_\_\_\_\_. The activity will run from \_\_\_\_\_ to \_\_\_\_\_.  
(Non-Athletic Team Activity) (Date) (Date)

Sincere and active leadership must be provided to the non-athletic team for the duration of its activities. Payment will only occur after proper paperwork is submitted at the conclusion of the non-athletic team's season.

**BUILDING:** \_\_\_\_\_ **FACILITIES TO BE UTILIZED:** \_\_\_\_\_

**EQUIPMENT TO BE USED:** \_\_\_\_\_

**DAY(S):** \_\_\_\_\_ **TIME:** \_\_\_\_\_ **MINIMUM # PARTICIPANTS:** \_\_\_\_\_

**DATE OF APPLICATION SUBMISSION:** \_\_\_\_\_

**ADVISORS**

Please list the advisors that will be present during the non-athletic team's season

\_\_\_\_\_  
(Print Name) (Print Name) (Print Name) (Print Name)

**PAYMENT DISTRIBUTION**

Please indicate below how payment should be distributed. If stipend should be distributed to just the advisor, please sign (Full stipend for one advisor). If the stipend should be split amongst co-advisors all co-advisors receiving payment should sign (Split stipend for co-advisors)

Full stipend for one advisor \_\_\_\_\_  
(Advisor Signature) (Date)

Split stipend for co-advisors \_\_\_\_\_  
(Co-Advisor Signature) (Co-Advisor Signature)

\_\_\_\_\_  
Co-Advisor Signature Co-Advisor Signature Date

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**Approval: (Please sign & date)**

1. \_\_\_\_\_  
Building Principal Date
2. \_\_\_\_\_  
Director of Athletics and Activities Date
3. \_\_\_\_\_  
Assistant Superintendent/Assistant to the Superintendent Date

**Approval of the Board of Education:** \_\_\_\_\_  
(Date)

***At the conclusion of your season, this form and its attachments (the team participation report and attendance record), must be completed and forwarded to the Director of Athletics and Activities.***

**OFFICE USE ONLY**

Stipend approved for this activity: \$ \_\_\_\_\_

**PAYMENT AUTHORIZATION:**

\_\_\_\_\_  
Director of Athletics and Activities

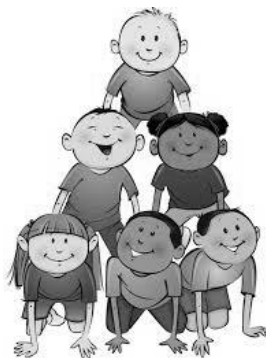
\_\_\_\_\_  
Date

\_\_\_\_\_  
Assistant Superintendent/Assistant to the Superintendent

\_\_\_\_\_  
Date

**NON-ATHLETIC TEAM ADVISOR PROCEDURES**

1. The team advisor will complete an application and submit it to the building principal at least three (3) weeks prior to beginning the activity.
2. The building principal and the Director of Athletics and Activities will indicate approval by signing the application and forwarding it to the Assistant Superintendent/Assistant to the Superintendent. Once the season has been completed, the advisor must submit:
  - a. Participation report
  - b. Attendance report (roster, dates activities are held, attendance on those dates)
  - c. The original application (kept in the athletics and activities office) with payment authorization signed by the Director of Athletics and Activities.
3. These items are then sent to the Assistant Superintendent/Assistant to the Superintendent for final approval.
4. The Assistant Superintendent/Assistant to the Superintendent will submit to the Business Office for payment.



Pleasant Valley School District  
**NON-ATHLETIC TEAM PARTICIPATION REPORT**



Date Submitted \_\_\_\_\_

In order to develop a district-wide participation report, please complete this form and submit with application form for payment at the conclusion of the activity to the Director of Athletics and Activities. Indicate any part of the program that was carried out jointly with other instructors and be sure to keep accurate attendance records during the season.

School: \_\_\_\_\_

Advisor: \_\_\_\_\_

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

Activity: \_\_\_\_\_

Time of Day: \_\_\_\_\_

Season: \_\_\_\_\_

Other Instructors:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Participants

# Boys \_\_\_\_\_

# Girls \_\_\_\_\_

**TOTAL #** \_\_\_\_\_



COMMENTS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Pleasant Valley School District



NON-ATHLETIC TEAM ACTIVITY
STUDENT APPLICATION & PARENT/GUARDIAN CONSENT

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_
(Please Print)

I hereby make application to participate in \_\_\_\_\_
(Non-Athletic Team Activity)
on \_\_\_\_\_
(Day(s) of the Week)

\_\_\_\_\_
Student Signature Date

Parent/Guardian consent is required for student to participate in the above-named activity.

I agree to permit my \_\_\_\_\_, \_\_\_\_\_
Son/Daughter/Ward Student/Applicant Full Name
to participate in \_\_\_\_\_ on \_\_\_\_\_
(Non-Athletic Team Activity) (Day/s of the Week)

I recognize that hazards may be encountered and neither the school nor any school authority will be held responsible in case of personal injury.

Date: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

Telephone Numbers:
\_\_\_\_\_ (HOME) \_\_\_\_\_ (CELL) \_\_\_\_\_ (WORK)

Parent/Guardian, please initial one of the following:
\_\_\_\_\_ I have already purchased school insurance for my child this school year.
\_\_\_\_\_ I have other insurance coverage as indicated below:
Name of Insurance Carrier \_\_\_\_\_
Policy/Agreement Number \_\_\_\_\_



