

WEST MIFFLIN AREA SCHOOL DISTRICT
West Mifflin, Pennsylvania

SUPPLEMENTAL ATHLETIC CONTRACT APPLICATION

Date: _____

Name: _____ Cell Phone: _____

Address: _____ Email: _____

City/State/Zip: _____

Posting Deadline: _____

Assigned Building (if District employee): _____

Posted Position: _____

Director of Athletics' Signature: _____

Brief Resume' Listing Qualifications:

Applicant's Signature

Director of Athletics: Please initial:

_____ ACT 34 Clearance received.

_____ ACT 34 Clearance filed but not received – Affidavit on file.

_____ Act 114 Clearance received.

_____ Act 114 Clearance filed but not received.

_____ ACT 151 Clearance received.

_____ ACT 151 Clearance filed but not received – Affidavit on file.

_____ ACT 126 Clearance received. Certificate on file.

SUPPLEMENTAL ATHLETIC CONTRACT APPLICATION
Filing Instructions

APPLICANT:

1. **Complete** SUPPLEMENTAL ATHLETIC CONTRACT APPLICATION
2. **Submit** original ACT 34 Clearance to Director of Athletics for verification after processed by State Police.
3. **Submit** original ACT 151 Clearance, Form 03460C – PA Department of Public Welfare Child Abuse History Clearance to Director of Athletics.
4. **Register** for FBI Federal Criminal History Fingerprinting under Act 114 of 2006, Section 111 of the Public School Code <https://uenroll.identogo.com/> Service code: **1KG6XN** for Pennsylvania Department of Education
5. **Return** original Act 114 FBI Federal Criminal History Fingerprinting Clearance to Director of Athletics with 90 days of submission.
6. **Return** original Act 126 Mandated Reporter Training Certificate of Completion to Director of Athletics upon completion.
7. **Submit** items 1, 2, 3, 5 and 6 to:
Director of Athletics
West Mifflin Area High School
91 Commonwealth Avenue
West Mifflin, PA 15122

NOTE: If you are currently a West Mifflin Area School District employee, you need not complete items 2, 3, 4, 5 and 6.

DIRECTOR OF ATHLETICS:

- Check Items Completed
- Stamp date received and forward copy of the Supplemental Athletic Contract Application to the Superintendent’s office, along with copies of ACT 34, ACT 151, ACT 114, ACT 126 and School Health Record and I-9 Form.
- File copy of ACT 34, ACT 151, ACT 114, ACT 126 and School Health Record and I-9 Form. Note: Copy original Social Security card and drivers’ license or passport and attach to I-9 form.

APPLICANTS HIRED – Must complete payroll documents at the Administrative offices at 1020 Lebanon Road, Suite 250.

- W-4 form – Payroll Office (412-466-9131 – Ext. 3022 or 3017)
(Bring your original Social Security card)

DIRECTOR OF ATHLETICS – Meet with the coach and detail the information regarding the position and the various reports which will need to be completed.

Updated: August 24, 2021
/suppathcont