



PUPIL ACTIVITY PERMIT APPLICATION CHECKLIST

Applicant Name: _____

School District: _____

The school district designee must sign this checklist and submit it to TCESC or the district superintendent. (See list on the bottom of the page.) Application and payment must be completed electronically on the ODE website. TCESC will not approve pupil activity permits without having this checklist and the appropriate information on file in the TCESC office. ODE will mail the permit to the employing school district.

This checklist confirms that the applicant has completed the following requirements:

_____ **Verification of completion of the first aid requirement is on file with the school district.**

_____ **Verification of completion of the concussion awareness training requirement is on file with the school district.**

_____ **A valid copy of the CPR card is on file with the school district.**

_____ **Verification of completion of NFHS Fundamentals of Coaching course is on file with the school district.**

_____ **Verification of completion of Sudden Cardiac Arrest course.**

_____ **Background checks are completed.** Please contact TCESC for additional information about specific situations such as individuals who do not live in Ohio.

_____ Ohio background check must be completed once and be on record at ODE.

_____ FBI background check must be completed every five years and be on record at ODE. An FBI check on record at ODE remains valid for 5 years.

District Designee Name (please print): _____

District Designee Signature: _____ **Date:** _____

The following districts must submit this sheet to TCESC:

- Bristol, Champion and Maplewood.

Other districts may request that this sheet be submitted to their superintendent.