Ohio Destination Imagination
Background Check Certification Form ***(for School/District Coordinators)***

Name: _____ Phone: _____

School/District: _____

Email: _____

☐ I affirm that all Team Managers and Assistant Team Managers from our school/district (listed below) are in compliance with the Ohio Kids for Creativity (OHDI) policy pertaining to background checks for the 2019-2020 season. I understand that I may be asked to provide documentation of one or more of these background checks in order for a team (or teams) to participate in a DI tournament.

I understand that the deadline for Team Managers and Assistant Team Managers to obtain background checks and provide documentation is January 15, 2020.

Signature: _____ Date: _____

List below the adults from your school/district who have met the Background Check requirement. Use the second page if necessary.

Team #	Name	Team #	Name
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____