

SCIENCE OLYMPIAD – ADULT PARTICIPANT ROSTER FORM

Central East Region, KUTZTOWN UNIVERSITY – March 20, 2025

A scanned copy of this completed form must be submitted to elaub@pascioly.org by: **March 12, 2025**

Coaches must complete this roster form that identifies all **ADULT** team members before team members are allowed to compete. Adult members constitute anyone who is **18 years of age or older**.

School _____ Division _____ Coach _____

School Address _____

	Name	Email Address	Cell Phone #	Teacher or Volunteer ?	Clearances Checked by Accompanying School?
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

I certify that all the adults listed above are either school personnel from my school or non-school personnel that are involved with the team in a capacity other than as a spectator (chaperone, assistant, etc.), and that all adults listed above have passed the relevant background checks and clearances mandated by the state of Pennsylvania for adults working with minors.

Principal's Signature

Coach's Signature