

KINGS CANYON UNIFIED APPLICATION FOR TEMPORARY ATHLETIC TEAM COACHING ASSIGNMENT

675 W. Manning Ave, Reedley, CA 93654 (559) 305-7010

COACHING POSITION _____ SCHOOL _____
 Paid _____ Volunteer _____ Head Coach _____ Assistant _____ Boys _____ Girls _____

PERSONAL INFORMATION

Last Name	First Name	Middle Name	SS# (last 4 digits)
Mailing Address	City	State	Zip Code
Home Phone ()	Business Phone ()	Cell Phone ()	
Are you a current employee of KCUSD? Yes No		If yes, position:	
Site:		Number of hours employed:	

GENERAL INFORMATION

Do you have a California Driver's License? License No. _____ Yes No

Are you 18 years of age or older? Yes No

If hired, can you provide the documents required to prove that you are authorized to work in the United States? Yes No

Have you ever been employed by Kings Canyon Unified School District? Yes No

If yes, give dates and reason for leaving: _____

Have you earned a high school diploma or its equivalent? Yes No

Have you ever been convicted of a felony or misdemeanor? Yes No

If yes, please attach explanation of when, where, and disposition of case(s). A conviction may not necessarily disqualify you from the job for which you applied.

EMPLOYMENT INFORMATION

Current Employer: _____

Current Title: _____ Date employed: _____

DECLARATION

I, the undersigned applicant, hereby certify that the foregoing information is true and correct and that I shall promptly notify the school principal of completion or any termination of participation in the training programs listed above.

I understand and agree that I will comply with the above-referenced "Code of Ethical Conduct," all California Interscholastic Federal rules and regulations, including those of the Kings Canyon Unified School District. Although I may be removed from this assignment without cause, I understand that failure to abide by rules, regulations and directive reference above may result in removal from this assignment or forms of employee discipline.

I understand and agree that employment is temporary. I understand and acknowledge that no permanency may be obtained in this assignment, and that even returning coaches must obtain approval of temporary athletic team coaching assignments each year.

I understand and agree that, because I am not a contracted employee of the District, my assignment as a temporary athletic team coach is pursuant to Education Code section 44919, and that I may be removed from such assignment at any time, in the discretion of the District Governing Board, without cause, pursuant to law.

I declare that I have read and understood all of the statements listed above. I affirm that the statements provided are true and complete to the best of my knowledge. If I misrepresent or Deliberately omit a fact in this application and/or in any documents attached to this application, I may be refused employment or, if employed, I may be terminated.

Coach's Signature: _____ Date: _____

Administrator's Signature _____ Date: _____