

APPLICATION FOR COACHING

Caledonia- Mumford Central School

Completion of all items is required

Name _____

Address _____ Tel _____ Cell _____

email _____

Date of Birth _____

Have you ever applied to or been an employee of this district? _____

(If so, when?) _____

Position(s) applying for _____

EDUCATIONAL PREPARATION

High School _____ Location _____ Graduation Date _____

College or University _____ Location _____ Graduation Date _____

Major(s) _____ Minor(s) _____

Other, e.g. courses in: Valid First Aid Certification? Date _____
Valid CPR Certification? Date _____
Valid AED Certification? Date _____
DASA Completion Date _____
TEACH Account Yes or No

SPORTS PARTICIPATION

<u>High School</u>	<u>Years</u>	<u>Letters Earned</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

College or University

Years

Letters Earned

_____	_____	_____
_____	_____	_____
_____	_____	_____

RELATED EXPERIENCES (sports, recreation, coaching or physical activities)

Year

_____	_____
_____	_____
_____	_____

Please provide any additional information which elaborates your skills or knowledge as a candidate.

REFERENCES: Give name and address (School district certificated personnel preferred)

1. _____
2. _____
3. _____

List any restrictions or conditions of your availability as a volunteer coach.

My signature below indicates that I have completed this application accurately and truthfully. I understand that misrepresentation of factual information herein is cause for termination as a volunteer coach.

Signature _____

Date of Application _____

DO NOT WRITE IN THIS SPACE – FOR ADMINISTRATIVE USE ONLY

Assignment(s)

Effective Dates: From _____ To _____
From _____ To _____

Approval Date: _____

Signature of approving administrator _____