

## John F. Kennedy Athletics Department

Cheektowaga-Sloan Union Free School District

Daniel Reiford Assistant Principal JFK HS Athletic Director John F. Kennedy High School 305 Cayuga Creek Road Cheektowaga, NY 14227

## **Coaching Application**

Please circle one:	Teacher in District	TA/Aide	Out of District
Name:			Date:
Home Address:			
(St	reet)	(Town/City)	(Zip)
Phone:		Date of Bi	rth:
(Cell)	(Work)		
Email:		SSN:	
Position you are applying	g for:		
Do you hold a teaching co	ertificate: Yes No (Area)_		
Do you have a valid First	Aid certification? Yes	No (Expiration d	ate)
Do you have a valid CPR	/AED certification? Yes	No (Expiration of	late)
Have you been fingerprin	nted? Yes No		
Do you have a New York	State Coaching Certificatio	n? Yes No Pend	ling
*Please attach/send c Athletic Director*	opies of your CPR, Firs	t Aid, Class Certifica	ates and Coaching Licences to
<b>Teaching experience</b> 6 Employer Name & Phone #	or non-teaching work h Dates of I	<b>istory:</b> Employment	Description of Duties
1			
2			
2.			



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Athletic Experience:		
Coaching Experience:		
References: (Please list p	rincipals, coaches, supervisors whom you have wor	ked with)
Name	Position/Title	Phone
1		
2		
3		
Briefly describe your p	hilosophy of coaching middle and/or high so	hool student athletes: