Eastwood Local Schools

Coaching Application

Name:_____

Address:_____

_____

Telephone Number:_____ Email Address:_____

Applying for:

☐ Boys ☐ Girls

☐ Head Coach ☐ Asst. Coach ☐ Middle School Coach ☐ Volunteer

Experience as a Player:

☐ Played at the high school level ☐ Played at the college level

☐ Played at the pro level ☐ Other experience

Describe experience:

_____

_____

_____

_____

Experience as a Coach:

☐ Coached at the youth level ☐ Coached at the middle school level

☐ Coached at the high school level ☐ Coached at the college level

Describe experience:

_____

_____

_____

_____

Describe your coaching philosophy in 50 words or less:

_____

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Why do you want to coach at Eastwood?

_____

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_____

Availability for practices:

_____

_____

Current Certifications (check all that apply):

☐ CPR	☐ Concussion Awareness	☐ Fundamentals of Coaching
☐ First Aid	☐ Mental Health & Suicide Prevention	☐ Pupil Activity Permit

*** Other certification areas will be required if recommended for a position

Have you been removed from any coaching position in the past?

☐ Yes ☐ No

If "Yes", please explain:

_____

_____

References (3) – include name, position, telephone number, email

_____ _____ _____ _____

_____ _____ _____ _____

_____ _____ _____ _____

I have not been convicted of a felony or offense involving a minor, agree to a background check, and certify that the application is true and accurate.

_____ _____

Signed Name - typing your name in this field declares intent of use as a legal signature Date