



Craven County Board of Education

3600 Trent Road, New Bern, North Carolina 28562

Volunteer Coaching Agreement

Name: _____

(Check one) ☐ Certified Employee ☐ Classified Employee ☐ Community Individual

School (coaching): _____

School (employed): _____

Email Address: _____

Date of Birth: ____/____/____

Race: _____

(Check) ☐ Fundamentals of Coaching ☐ Sudden Cardiac Arrest ☐ Concussions in Sports

Sport Activity: _____

Date: ____/____/____
Begin Date End Date

Sport Activity: _____

Date: ____/____/____
Begin Date End Date

I, of my own free will, volunteer my time and service to participate in a school volunteer coach capacity without promise, expectation or receipt of any form of compensation, benefits or remuneration for service rendered.

I understand that my participation as a volunteer may be terminated at any time, without cause and I will have to submit to a criminal background check.

Signature of Volunteer

Date

Signature of Principal

Date

Central Services Use Only

Assistant Superintendent of Student Services Signature

Date

Assistant Superintendent for HRS Signature

Date

Board Approved ☐ Denied ☐

Date _____