



Coaching Application

Coaching Position

I want to coach FOOTBALL as: \_\_\_ the Head Coach / \_\_\_ an Assistant Coach / \_\_\_ Either

Division: \_\_\_ 8U / \_\_\_ 10U / \_\_\_ 12U / \_\_\_ 14U / \_\_\_ Any (\_\_\_ I am a Student under 18)

I want to coach CHEER as: \_\_\_ the Head Coach / \_\_\_ an Assistant Coach / \_\_\_ Either

Division: \_\_\_ 6U / \_\_\_ 8U / \_\_\_ 10U / \_\_\_ 12U / \_\_\_ 14U / \_\_\_ Any (\_\_\_ I am a Student under 18)

Applicant Information

Full Name: \_\_\_ Date: \_\_\_
Last First M.I.

Address: \_\_\_
Street Address Apartment/Unit #

City State ZIP Code

Phone: \_\_\_ Email \_\_\_

Experience

\* Will you have children in the program this year? \_\_\_ No \_\_\_ Yes

If yes, state football/cheer, year and age division: \_\_\_

\* Have you coached with the Jr. Falcons program in the past? \_\_\_ No \_\_\_ Yes

If yes, state football/cheer, year and age division: \_\_\_

\* Do you have coaching experience with other sports and/or programs? \_\_\_ No \_\_\_ Yes

If yes, state sport, program, year and age division: \_\_\_

Availability

\* Are you available for practices Monday – Friday between the hours of 5:30pm-8:30pm? \_\_\_ No \_\_\_ Yes

\* Are you available ALL Saturdays from mid-August through mid-November? \_\_\_ No \_\_\_ Yes

\* Do you understand this is a volunteer position that requires full commitment? \_\_\_ No \_\_\_ Yes

\* Are you currently CPR/First Aid Certified? \_\_\_ No \_\_\_ Yes If yes, Expiration date: \_\_\_

\* Are you willing to complete Concussion Certification? \_\_\_ No \_\_\_ Yes

\* Are you willing to complete a background check and LiveScan? \_\_\_ No \_\_\_ Yes

**Skills**

Do you have previous volunteer experience? \_\_\_ No \_\_\_ Yes

If yes, please provide a brief description of your involvement: \_\_\_\_\_

\_\_\_\_\_

Please list other experience and/or skills that should be considered: \_\_\_\_\_

\_\_\_\_\_

Explain why you want to be a coach for the Jr. Falcons program: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**References**

\* Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No

\* Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No

\* Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_ May we contact? \_\_\_ Yes \_\_\_ No

**Disclaimer and Signature**

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to being a part of the Colfax Jr. Falcons program, I understand that false or misleading information in my application may result in my immediate release.*

*By signing below, I agree to be available for all practices and games arriving timely and behaving responsibly.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_