



COACHING APPLICATION

Sport Coaching: _____ Level/Age Group: _____

Name: _____ Social Security #: _____ Driver's License #: _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: _____ Email: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Have you ever pled guilty or no contest to, or have been convicted of a crime? _____

If yes, explain: _____

Marital Status: Married _____ Single _____ Number of Children: Sons _____ Daughters _____

Please circle the highest year completed in school:

School: 1 2 3 4 5 6 7 8 9 10 11 12
College: 1 2 3 4 Post Grad: 1 2 3 4

Employer: _____ Occupation: _____

Have you coached this sport before? _____ Number of years: _____ Organization: _____

Have you played this sport before? _____ At what level? _____

List any training you have as a coach: _____

Please rate your knowledge of the following topics with regard to this sport by circling the appropriate number:

- 1. You know very little 2. You have reasonable good knowledge 3. You know a great deal

Rules of Sports: ___ Organizing Practice: ___ Organizing a Contest: ___ Equipment Needs: ___ Motivating Children: ___
Developing Sportsmanship: ___ Communication Skills: ___ Working with Children: ___ Working with Parents: ___
Ability to Teach Skills of Sport: ___ Injury Prevention and Treatment: ___ Legal Duties: ___

I give permission for the Harrisonburg Parks and Recreation Department to conduct a background check on me which may include a review of criminal and child abuse records maintained by governmental agencies. I understand that if appointed, my position is conditional upon the Harrisonburg Parks and Recreation Department receiving no inappropriate information on my background. I hereby release and agree to hold harmless from liability to the local league, employees and volunteers thereof, or any other person or organization that may provide such information. I also understand that regardless of previous appointments I may not be appointed to a volunteer position. If appointed I understand that, prior to expiration of my term, I am subject to suspension by the Harrisonburg Parks and Recreation Department.

Applicant: _____ Date: _____ Applicant Name: _____
(Signature) (Please Print)

NOTE: The local league and the Harrisonburg Parks and Recreation Department will not discriminate against any person on the basis of race, creed, color, national origin, marital status, sex or sexual orientation, or disability.

Please list two references: Name: _____ Address: _____ Phone: _____
Name: _____ Address: _____ Phone: _____