

Fort Cherry School District

COACHING APPLICATION FORM



DATE:				
NAME				
ADDRESS				
TELEPHONE: HOME				
EMAIL ADDRESS				
1. Circle the highest year you	completed in school and	list the name of th	e schools:	
High School: 1234				
College: 1 2 3 4				
Degree(s):				
Areas of Certification				
2. What is the position for whi				
application. 3. Have you played this sport	COACHING B	<u>ACKGROUND</u> Number of ye	PORT for the remainder of this ars	
		High School Level Collegiate Professional		
4. What other sport(s) have ye	ou plaved?			
SPORT	LEV	ΈL	# OF YEARS PLAYED	
5. Have you coached this spo	vrt before? Yes No	if yes, where/wh	en	
6. What other sports have you				
	SPONSORING AGENT	LEVEL	# OF YEARS COACHED	
7. Have you had any forma	5			
If yes, please describe (f	or example: PE degree,	coaching cours	es, clinics etc.)	



**Fort Cherry School District** 



- 8. Describe any informal training you have completed to assist your coaching. (for example: reading books, watching sports etc.)
- 9. Do you have any training in the care and treatment of athletic injuries? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.
- 10. Please rate your knowledge of the following topics with regard to this sport by circling the appropriate number.
  - 1= know very little
  - 2= have reasonable knowledge
  - 3= know a great deal
- 1 2 3 Basic technique
- 1 2 3 Advanced technique
- 1 2 3 Rules of the sport
- 1 2 3 Motivating players
- 1 2 3 Communication skills
- 1 2 3 Warm-up conditioning techniques
- 1 2 3 Working with parents
- 1 2 3 General principles for teaching techniques/skills
- 1 2 3 Time management

- 1 2 3 Organizing a practice
- 1 2 3 Developing sportsmanship
- 1 2 3 Strategy of the sport
- 1 2 3 Organizing a contest
- 1 2 3 Equipment need and specifications
- 1 2 3 Injury prevention and treatment
- 1 2 3 Athletic nutrition
- 1 2 3 Legal duties
- 1 2 3 Conflict Management

11. Please list the name, address, email, and telephone number of three references who can attest to your coaching potential. One should be your most recent supervisor.

NAME	ADDRESS	EMAIL	TELEPHONE NO.

All required clearances must be presented before employment begins. It is recommended that you apply for these clearances before submitting application. Clearance information is available on the District website.

PLEASE RETURN APPLICATION TO:

Mr. Thomas Scarpone Fort Cherry High School 110 Fort Cherry Road McDonald, PA 15057 724-796-1551 Ext. 2421

OFFICE USE:		
Clearances submitted Application Complete		