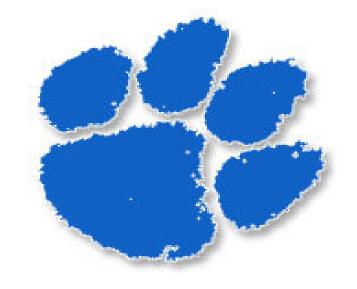
Catoctin Cougars



Coach's Application

Catoctin Youth Association.

Confidential

Catoctin Youth Association: Football & Cheerleading

Application for Head Coach or Coach

| Date | |
|---|--|
| Name: | Home Phone # |
| Address: | Work Phone # |
| Position: | Head Coach either |
| Level: Varsity | JV Pony Mini Pony Flag |
| <u>Name:</u> | References Phone number: |
| 1 | |
| 2 | |
| 3 | |
| | erences (with phone numbers) that have knowledge of your coaching erience. If no prior experience, please check here |
| Have you ever been If yes please explain | convicted of a Felony and/or Misdemeanor? Yes No n: |
| | |
| | |
| List your qualification | ons for the applied position: |
| | |
| | |

Catoctin Youth Association: Football & Cheerleading

| List the goals you would attempt to accomplish if selected as a coach (in priority order): |
|---|
| |
| Have you ever held a coaching position? Yes No If yes, what position and how long? Position Time Age, if under 21 years of age: years old Other Information: |
| Other Information: Driver's License # State Expiration date |
| Date of Birth:// As an applicant, I understand all of the following: The above information is true and accurate to the best of my knowledge. A member of the Board of Directors or a selected appointee may need to verify the information on this application, as well as a background investigation, if deemed necessary. My signature on this application shall authorize such, but only during the application period or while I am serving in an accepted position for which this application applies. If I accept any position for which this application applies, I will accept and act in the manner as specified in the by-laws and policies of the organization. I understand that, if accepted, false statements or pertinent omissions on this applications or failure to act as required in # 3 above may be considered sufficient cause for dismissal from said accepted position. |
| Applicant's Signature Date |