

REP Coaching Application 2008-2009

IMPORTANT NOTE:

Submitting this application does not guarantee your acceptance as a Coach for the 2008-2009 season. This Form is for the exclusive use of the SAYHA Coaching Committee to begin the evaluation process and make subsequent recommendations to the Board of Directors.

DATE OF BIRTH: _____/_____/_____

 LAST NAME FULL LEGAL FIRST NAME

 HOME ADDRESS CITY / ST / ZIP

 MAILING ADDRESS – if different from home CITY / ST / ZIP

(_____) _____ (_____) _____ (_____) _____
 HOME PHONE WORK PHONE CELL PHONE

 EMAIL ADDRESS

 EMPLOYER OCCUPATION LENGTH OF EMPLOYMENT

 EMPLOYER ADDRESS CITY/STATE/ZIP

Have you completed a PNAHA Axiom Background check? YES NO If YES, est. date of check _____/_____/_____

COACHING EXPERIENCE

Level	Association	City, State	Year
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please check box if you have a valid USA Coaches card Level _____ Card # _____

Please check which division you wish to coach:

- Squirt "A"
 Squirt "B"
 PeeWee "A"
 PeeWee "B"
 Bantam "A"
 Bantam "B"
 Midget U-16
 Midget U-18
 Midget "B"

OTHER VOLUNTEER EXPERIENCE – use back if necessary

Description of Activity / Position _____

REFERENCES – use back if necessary

	First & last name	Address	Phone
1.	_____	_____	_____
2.	_____	_____	_____

I understand that the information I have provided may be verified by contacting persons or organizations named in this application or by contacting any person or organization that may have information concerning me. I hereby release and agree to hold harmless from liability any person or organization that provides information. I also agree to hold harmless the chartered organization, USA Hockey, PNAHA and the officers, board members, employee and volunteers thereof. In signing this application, I affirm that the information I have given is true and correct.

 SIGNATURE OF APPLICANT DATE

OFFICIAL USE ONLY: Approvals: We are unaware of any information contrary to the information stated on this application.

 INTERVIEWER'S SIGNATURE DATE

 COACHING DIRECTOR'S SIGNATURE DATE