

PARKS AND RECREATION
Scott Rodgers
ATHLETIC COORDINATOR



307 Smith Street
Conway, SC 29526
(843) 915-7873
FAX (843) 248-7594

VOLUNTEER COACH APPLICATION

Application must be filled out completely & legibly. PRINTED IN BLACK INK OR TYPED

*NAME _____
LAST FIRST MIDDLE

*ADDRESS _____
STREET CITY STATE ZIP

*TELEPHONE NUMBER (____) ____-____ (____) ____-____ (____) ____-____
HOME # WORK # CELL #

^E-MAIL ADDRESS _____

*SOCIAL SECURITY # ____ / ____ / ____ *DATE OF BIRTH ____ / ____ / ____

*required ^preferred

LIST ANY PREVIOUS YOUTH SPORTS YOU HAVE ASSISTED OR COACHED:

SPORT POSITION WHEN

SPORT POSITION WHEN

SPORT POSITION WHEN

COACHING DESIRED: *CIRCLE ONE* HEAD COACH ASSISTANT HEAD COACH

SPORT: _____

LOCATION : _____

AGE GROUP: _____

Examples: (AGES 4-5) (7 and Under) (10 and Under) (12 and Under) (15 and Under)

ARE YOU N.Y.S.C.A. CERTIFIED AND IN CURRENT GOOD STANDINGS? *CIRCLE ONE*

Yes / No. If Yes, please give your N.Y.S.C.A. # _____

LIST ALL ORGANIZATIONS YOU SERVED WITH IN THE LAST FIVE YEARS:

SIGNATURE REQUIRED ON 2nd PAGE

PERSONAL REFERENCES: (NAME, ADDRESS OR PHONE NUMBER)

1. _____
2. _____
3. _____

EMPLOYMENT HISTORY

CURRENT EMPLOYERS NAME: _____
ADDRESS: _____
STARTED ON Mo/Yr. _____ **PHONE NUMBER** _____
SUPERVISOR _____ **May We Contact Him or Her? YES NO**
YOUR TITLE _____
Duties: _____

PAST EMPLOYERS NAME: _____
ADDRESS: _____
PHONE NUMBER _____ **STARTED ON Mo/Yr.** _____ **TO Mo/Yr.** _____
SUPERVISOR _____ **May We Contact Him or Her? YES NO**
YOUR TITLE _____
REASON FOR LEAVING _____
Duties: _____

ANY ADDITIONAL INFORMATION YOU WOULD LIKE FOR US TO CONSIDER:

***NOTICE:** Please read this carefully and sign below to indicate you have read, fully understand this notice and its contents, and agree to its terms.*

It is understood and agreed that any misrepresentation or omission of information by me in this application will be sufficient for cancellation and/or separation from the league. Furthermore, I understand that just as I am free to resign at any time, the league reserves the right to cancel my membership at any time with or without prior notice. I give the right to my employer, persons, references, organizations, and previous employers to provide any information pertinent to my being selected. I also understand, agree to and hereby authorize a background investigation, which includes a criminal record check.

***SIGNATURE** _____ **DATE** _____ / _____ / _____
