

**HIGHLAND CENTRAL SCHOOL DISTRICT  
HIGHLAND, NEW YORK 12528**

**APPLICATION FOR COACHING POSITION**

ATHLETIC OFFICE, HIGHLAND HIGH SCHOOL, 320 PANCAKE HOLLOW ROAD, HIGHLAND, NEW YORK 12528  
TELEPHONE: 845-691-1030

Position \_\_\_\_\_ Date Available \_\_\_\_\_

**PERSONAL DATA**

Name: _____					
Last		First		Middle	
Present Address: _____				Telephone: _____	
Street		City	State	Zip	
Permanent Address: _____				Telephone: _____	
Street		City	State	Zip	
Social Security Number: _____			Retirement Number: _____		
Present Occupation & Employer: _____				Current Salary: _____	

**CERTIFICATION / COURSES**

Please check those requirements which you have completed and provide appropriate documentation:

- \_\_\_\_\_ First Aid Certification
- \_\_\_\_\_ Adult CPR
- \_\_\_\_\_ Identification and Reporting of Child Abuse and Maltreatment
- \_\_\_\_\_ Training in School Violence Prevention and Intervention

Required Coaching Courses:

- \_\_\_\_\_ Philosophy, Principles, and Organization of Athletics in Education
- \_\_\_\_\_ Theory and Techniques of Coaching
- \_\_\_\_\_ Health Sciences Applied to Coaching

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**EDUCATION PREPARATION (Chronological Order)**

HIGH SCHOOL/COLLEGE/UNIVERSITY	LOCATION	DATES ATTENDED	DEGREE EARNED	DATE CONFERRED	MAJOR	MINOR

Number of Graduate Credits beyond BA (if you do not hold a Master's Degree) \_\_\_\_\_

Number of Graduate Credits beyond MA (if you do not hold a Ph.D. or Ed.D.) \_\_\_\_\_

**STUDENT TEACHING EXPERIENCE**

SCHOOL	ADDRESS	DATES	SUPERVISING TEACHER

**COACHING / TEACHING / ADMINISTRATIVE EXPERIENCE (Chronological Order)**

SCHOOL AND DISTRICT	ADDRESS	DATES FROM TO	GRADE/SUBJECT	REASON FOR LEAVING

**TENURE IN PRIOR DISTRICTS**

DISTRICT	ADDRESS	APPOINTMENT DATE	TENURE AREA

**NON-TEACHING EXPERIENCE**

FIRM OR ORGANIZATION	ADDRESS	DATES	POSITION

Are you a citizen of the United States? YES \_\_\_\_\_ NO \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

If yes, give details: \_\_\_\_\_

Fingerprinting is required of all district employees per 2001 SED Regulations. Have you been fingerprinted under these new regulations? YES \_\_\_\_\_ NO \_\_\_\_\_

Have you ever been brought up on 3020A charges? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes, what was the outcome of the charges? \_\_\_\_\_

What was the reason for the 3020A charge? \_\_\_\_\_

\_\_\_\_\_

**REFERENCES**

List **three**; especially immediate supervisors, others may include cooperating teachers, colleagues and central office staff.

NAME	OFFICIAL POSITION	ADDRESS (Include Zip Code)	TELEPHONE

**FOR SCHOOL DISTRICT USE ONLY**

**REFERENCE CHECK**

This section to be completed by immediate supervisor

1. \_\_\_\_\_ Date \_\_\_\_\_ Comments: \_\_\_\_\_

2. \_\_\_\_\_ Date \_\_\_\_\_ Comments: \_\_\_\_\_

3. \_\_\_\_\_ Date \_\_\_\_\_ Comments: \_\_\_\_\_

\_\_\_\_\_  
Signature of person making reference check Date

**CANDIDATE'S STATEMENT**

It is suggested that the candidate use this page to comment briefly on any other experience or special ability, which may contribute to your success, if you are selected for the position for which you have applied. Any additional information that will assist the administrators of the Highland Central School District to more accurately determine your qualifications is also welcome.

Coaching Philosophy: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Team goals and/or expectations for the season: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CANDIDATE'S AFFIDAVIT**

I certify that the information given in this application is correct.

I understand that any false statement made on this application, or withheld information pertinent to my candidacy constitutes grounds for immediate dismissal.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_