

COACHING APPLICATION

Crowley County School District Re 1-J, Ordway, Colorado

Application Date: _____ COACHING Position Sought: _____

Name: _____

Home Address: _____

City, State, Zip: _____ Email: _____

Work Phone: _____ Cell Phone: _____

Educational Training

High School _____ Location _____ Graduation Date _____

College or University _____ Graduation Date _____

Major(s) _____ Minor _____

Other _____

Sports Participation:

High School	Years	Letter Earned
_____	_____	_____
_____	_____	_____
_____	_____	_____

College	Years	Letter Earned
_____	_____	_____
_____	_____	_____
_____	_____	_____

(For office use only)

Date Received: _____

AD Approved: _____

Principal Approved: _____

Approved by Board: _____

Fingerprints Submitted: _____

Fingerprint Record Received: _____

Related Experience (Sports, recreation, coaching, etc):

References: (Give name, position, address, phone)

1. _____
2. _____
3. _____
4. _____
5. _____

What is your philosophy of coaching (Please put in your handwriting?)

Do you have a valid Colorado State Teaching Certificate? Yes _____ No _____

Do you have a valid First Aid Card? Yes _____ No _____

Return to:

Superintendent of Schools
Crowley County School District Re. 1-J
1001 Main Street
Ordway, CO 81063

To Be Completed by School Personnel Only

Employment Start Date: _____ to _____

Average Hours Daily _____ Hourly Wage Rate: _____

Experience Credit for Pay Purposes (Please Circle) 0, 1, 2, 3 years