



CONCORD PARKS AND RECREATION DEPARTMENT COACHING APPLICATION

Athletic Office Use: Background Check, Approved, Denied

1. NAME

2. ADDRESS

3. CITY STATE ZIP

4. TELEPHONE # HOME WORK CELL OTHER EMAIL:

5. SOCIAL SECURITY # DRIVER'S LICENSE #

6. APPLICANT'S AGE: 20-30 31+ (PLEASE CHECK) Date of Birth

7. EDUCATION: High School Graduate College

8. ARE YOU A NEW COACH AT CONCORD? COACHING EXPERIENCE

9. ARE YOU A CERTIFIED NYSCA COACH? Yes No Willing to be?

10. CHARACTER REFERENCE: (1) Name Address (2) Name Address (3) Name Address

11. COACHING EXPERIENCE (IF ANY) EXPLAIN

12. REASONS FOR DESIRING TO COACH

13. STATEMENT OF PHILOSOPHY TOWARD YOUTH SPORTS

14. If accepted, I agree to attend all meetings and workshops called by the CONCORD PARKS AND RECREATION ATHLETIC DIVISION. Yes No

15. I understand that failure to conduct myself in a sportsmanlike manner will result in dismissal from coaching. Yes No

16. I understand that the Concord Parks and Recreation Department will perform a mandatory background check.

17. If accepted for a coaching position, head coach or assistant, I hereby agree to abide by the rules and regulations and Code of Ethics set forth by the CONCORD PARKS AND RECREATION DEPARTMENT.

SIGNATURE DATE