

SISTERS SCHOOL DISTRICT #6

525 E. Cascade Ave.

SISTERS, OR 97759

(541) 549-8521

Fax (541) 549-8951

**COACHING/CO-CURRICULAR APPLICATION
AN EQUAL OPPORTUNITY EMPLOYER**

PERSONAL INFORMATION

Name _____ Date of Application _____

Address _____
(mailing & street) (city) (state) (zip)

Phone No. _____ last 4 digits of SS#. _____

E-Mail Address _____

**ATHLETIC PROGRAMS DIRECTOR/
CO-CURRICULAR/COACHING POSITION DESIRED**

Sport _____

Co-Curricular Activity _____

Years' Experience in this Activity: [] 1-3 Years' Experience [] 4+ Years Experience

Where are you employed now? _____ May we inquire
of your employer? _____

Do you have a current CPR / First Aid Card? [] Yes [] No If yes, expiration date _____

Do you have a current National Federation of State High School Association (NFHS)
coaching certificate? [] Yes [] No

The facts set forth in this application for employment are true and complete to the best of my knowledge. I understand, if employed, I will be required to submit to a fingerprint/criminal history records check at my own expense, and to pre-employment drug screening test at district expense. I understand that false statements in this application and any supplemental required form shall be considered sufficient cause for immediate dismissal. I authorize investigation of all statements contained in this application and supplemental forms.

Signature of Applicant

Date

EDUCATION

	NAME & LOCATION OF SCHOOL	# OF YEARS COMPLETED	DIPLOMA OR DEGREE	MAJOR AREA
HIGH SCHOOL				
TRADE SCHOOL				
COLLEGE OR UNIVERSITY				
OTHER SCHOOLING				

PREVIOUS COACHING EMPLOYMENT

(Give information related to position(s) for which you are applying.)
(LIST MOST RECENT FIRST)

Name & Address	Position	Date (Month & Year)
		From _____ To _____
		From _____ To _____
		From _____ To _____
		From _____ To _____

PERSONAL / PROFESSIONAL REFERENCES

(Give information related to position(s) for which you are applying.)
(LIST MOST RECENT FIRST)

Name	Phone Number	Occupation