Application for Coaching Position

Port Byron Central School District 30 Maple Ave., Port Byron, NY 13140 Phone: 315-776-5728 Fax: 315-776-6199

Date Submitted: _____ Name: _____ Address: City: _____ State: ____ Zip: ____ Home/Cell Phone: _____ Email: ____ Please answer the questions below by circling YES or NO. YES NO 1. Are you related to a board member or an administrator of the Port Byron CSD? YES NO 2. Have you ever been convicted of a felony? YES NO 3. Have you ever been convicted of a misdemeanor involving a student or minor? YES NO 4. Have you ever been dismissed, fired or discharged from a position of employment based on a claim of misconduct, unsatisfactory performance, incompetency or neglect of duty? YES NO 5. Have you ever possessed, used or been under the influence of drugs or alcohol during the performance of duties? (If you answered "YES" to any of the questions above, please attach a written explanation.) Coaching Background 1. Check the position and level for which you are applying: Head Coach: □ Varsity □ JV □ Mod Assist. Coach: □ Varsity □ JV □ Mod Volunteer - Varsity - JV - Mod 2. Check the sport you are applying to coach: □ Baseball □ Boys Basketball □ Girls Basketball □ Cheerleading □ Cross Country □ Dance □ Field Hockey □Football □ Golf □ Outdoor Track & Field □ Softball □ Volleyball □ Wrestling 3. Have you previously coached at this level? ☐ YES ☐NO If yes, list the most recent location: How many years of experience? 4 List your most recent coaching position and duties: 5. Check personal playing experience: □ High School: ____ □ College: ____ Coaching Certification: Check if yes, enter date(s) certified & (provide copy) □ CPR □ First Aid □ Fingerprinting □ DASA □ NFHS Concussion □ □ Child Abuse □ □ School Violence Workshop □ □ Philosophies & Principles ____ □ Health & Science ___ □ Theories & Tech ____