



NEWINGTON PUBLIC SCHOOLS

VOLUNTEER COACHING APPLICATION

Name: _____ Social Security No: _____

Address: _____ Cell Phone No. _____

Home Telephone: _____ Work Telephone: _____

Email Address: _____

Volunteer Position Desired: _____ Season & Year _____

Present Employment Status: _____

Educational Background: _____

Have you ever been convicted of a crime or do you have any criminal charges pending against you? yes / no
(A "yes" answer does not automatically disqualify you from employment). If yes, please explain in writing and attach the statement to this form.

ATHLETIC EXPERIENCE

<u>SPORT</u>	<u>NUMBER OF YEARS</u>	<u>AWARDS</u>
<u>High School</u>		
<u>College</u>		
<u>Other (Rec.Sport/Hobby/Specialties:</u>		

List coaching experience and years: _____

Which of the following credentials do you have? (Check)

- _____ Connecticut Coaching Permit Year _____ Expiration Date _____
 - _____ CPR Certificate Year _____ Expiration Date _____
 - _____ First Aid Certificate Year _____ Expiration Date _____
 - _____ Emergency Coaching Permit Year _____ Expiration Date _____
 - _____ Connecticut Teaching Certificate Year _____ Expiration Date _____
 - _____ Lifeguard Training/WSI Year _____ Expiration Date _____
- (Is required to volunteer for swimming)

Volunteer coaches must: (1) meet with the Athletic Coordinator and present current CPR & First Aid Cards; and (2) be fingerprinted prior to volunteering with any Newington High School athletic team.

Check the following areas in which you have successfully completed courses which can be documented by a transcript:

- _____ Coaching Modules, Classes, Workshops
- _____ Safety in the use of sports equipment and facilities.
- _____ Legal responsibilities of athletic coaching.
- _____ Prevention of, care of, and recovery from athletic injuries.
- _____ Anatomical, kinesiological and physiological principles relating to athletics.
- _____ Principles and practices of coaching adolescents.
- _____ Sociological and psychological aspects of athletics as they relate to adolescents.
- _____ Nutrition as it relates to athletic performance.

Will you voluntarily participate in inservice programs which would add to your coaching experience? _____

Coaching philosophy of applicant: _____

Three References:

Name	Address	Telephone #
_____	_____	_____
_____	_____	_____
_____	_____	_____

I authorize the Newington Board of Education to make any investigation of my personal or employment history and authorize any former employer, person, firm, corporation, credit agency or government agency to give the Newington Board of Education any information they may have regarding me. In consideration of the Newington School board's review of this application, I release the Newington Board or Education, its agents and employees, and all providers of information from any liability as a result of furnishing and receiving this information.

I hereby certify that the information given on this application is correct and true. I understand that falsification of any statement on this application could result in voiding the terms of an employment contract.

Agreement of Volunteer Coach: (1) I will work at all times under the direct supervision of the assigned coach; and (2) I will not assume sole responsibility for a sub-varsity team, a group of athletes or an individual athlete in a practice game situation.

Signature: _____

Date of Application: _____

REV'D 7/21/08

DO NOT WRITE BELOW THIS LINE

Fingerprinting scheduled with _____ Date _____

Date Received in Athletic Office: _____ Date Sent to Personnel Office: _____

Criminal History Check List	_____	_____
Fingerprint	_____	_____
Certified Check or Money Order \$19.25	_____	_____