

East Clinton Local Schools
Athletic Department
174 Larrick Rd.
Sabina, OH 45169

State Law requires all prospective
employees to have a current
BCI/FBI fingerprint check

Application for Coaching Position

Date:

Name

Last

First

Middle Initial

Address

Street

City

State

Zip

Telephone: Home: Cell:

Email Address:

Current Employment

Company:

Address:

Street

City

State

Zip

Telephone: Supervisor:

Employed From to

What sport(s) are you interested in coaching?

Educational Background

High School

College/University Attended

Ohio Teaching Certificates Held (if any)

Previous Participation in Organized Sports

High School:

College:

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Previous Coaching Experience:

Do you have a valid Pupil Activity Permit? _____ If so, what is the expiration date? _____

Do you have a valid CPR card? _____ If so, what is the expiration date? _____

Will your job permit you to be at practice by school dismissal time during the season? Yes _____ No _____

List Below three references who can speak to your coaching ability:

Name: _____	Phone: _____
Name: _____	Phone: _____
Name: _____	Phone: _____

Briefly state your coaching philosophy:

DISCLOSURE STATEMENT

I certify that all statements made by me in this application are true, complete and correct to the best of my knowledge. I also certify that I have not been convicted of any felony. I am aware that any false statements will be sufficient cause for dismissal from any position I may hold for the East Clinton Local School District.

I understand that the Board of Education may want to verify the statements I have made in this application. I hereby give my permission for the East Clinton Local School District or its authorized representatives, either at this time or at any time, whether listed among my references or not, to contact persons regarding my qualifications and fitness for the position. I further give my permission for the district to request and review any of my medical records, employment records, court records, and police records from any local, state, or federal agency keeping such records.

I agree to complete the criminal background check and provide the results to the district. I understand that if the report from the Ohio Bureau of Criminal Identification and Investigation is not received prior to my hiring, my contract of employment is conditioned upon those results being satisfactory to the Board of Education.

I understand that the completion of this document is required for further consideration of my application.

Applicant's Signature

Date