

Nelson County Parks & Recreation Dept.

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COACHING APPLICATION

P.O. Box 442
Lovingson, VA 22949
Phone: 434-263-6465
Fax: 434-263-6022

NAME: _____ DATE OF BIRTH: _____
ADDRESS: _____ TELEPHONE (HOME): _____
CITY/STATE//ZIP: _____ TELEPHONE (BUS): _____
EMAIL: _____ TELEPHONE (CELL): _____

* PROVIDE ALL ADDRESSES YOU HAVE LIVED FOR LAST 10 YEARS (use additional pages if necessary)

Address: _____ City/State/Zip: _____ Dates: ____ to ____

Address: _____ City/State/Zip: _____ Dates: ____ to ____

1. Do you have a valid driver's license? ___ Yes ___ No

State: _____ Number: _____

2. What sport do you want to coach? _____ Have you played the sport? ___ Yes ___ No

3. Have you ever coached the sport? ___ Yes ___ No

If Yes, where ? _____ What ages ? _____

4. Do you have any formal training as a coach?..... ___ Yes ___ No

If Yes, please describe: (NYSCA, ASEP, other) _____

5. Have you ever received treatment for alcohol or drug abuse ? ___ Yes ___ No

6. Have you ever had charges brought against you for child molestation, abuse, or neglect? ___ Yes ___ No

7. Do you have Basic First Aid training? If so, what ? _____

8. Have you ever been arrested or convicted of an offense against the Law other than a minor traffic violation? (A conviction does not mean you cannot coach. The offense and how recently you were convicted will be considered). ___ Yes ___ No (If yes, explain fully on a additional sheet)

9. Please list the name, address, and phone number of two persons who know you sufficiently well to comment on your past coaching or you as a potential.

Name	Address	Phone
_____	_____	_____
_____	_____	_____

If accepted for a coaching position, I hereby agree to abide by the Nelson County Parks & Recreation Department philosophies, rules, and regulations.

I understand that the information which I have furnished herein is subject to verification, which may include a criminal background check and reference interviews. My signature below is my consent to authorize reference interviews and a background check.

Signature: _____ **Date:** _____