

## **Phoenix Storm Football Club Coaching Application**

(All information provided is Confidential) **Personal Information (please print all information)** Full Name: \_\_\_\_\_ First Middle Address: \_\_\_\_\_\_St: \_\_Zip:\_\_\_\_ Home Phone: \_\_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Employer: Occupation: Employer Address: \_\_\_\_\_ City: \_\_\_\_\_ St: \_\_\_\_ Drivers License#:\_\_\_\_\_Exp:\_\_\_\_ Social Security#\_\_\_\_-Do you have Auto Insurance? \_\_\_Yes \_\_\_ No **Football Coach Information:** Circle Division(s) in which you wish to coach this year (See attached division age/weight sheet) Mighty Mite Cadet Jr. PeeWee PeeWee Jr. Midget Midget 14u List the division that you are applying to be the Head Coach: Reason why: Can you attend all Practices, Games, and Clinics? Yes No If not, who would act in your absence? \_\_\_\_\_ Have you ever been suspended or expelled as a Coach in any youth sport organization? \_\_\_\_Yes \_\_\_\_No If yes, explain: Football Coaching Background: (League) (Position) (Team) (Year)

experience working with	other youth organizations:		-
dditional information:			
	ist two personal references (no relati		
Name:	Phon	2:	
Name:	Phon	e:	
Iave you ever been conv	icted of a felony?YesNo		
If yes, when and w	here?		
Iave you ever been conv	icted of any crimes against children	YesNo	
If yes, when and w	here?		
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understand that:			
contacting persons or org agree to hold harmless an	anizations that may have information y person organization that provides	ed, if necessary, by obtaining a record check in concerning me. I hereby release and information. I also agree to hold harmless. I and any person or organization that provides	
B. In signing this ε	application, I affirm that the informa	tion I have given is true and correct.	
Signature of Applicant: _		Date:	
	Disapproval	Date:	
Board: Approval			