SANGRE DE CRISTO JR. / SR. HIGH SCHOOL

COACHING APPLICATION

Completion of all items required					
Name	Telephone				
Date of Birth					
Position(s) Desired					
General Health					
Have you ever applied to or been en	nployed by this district?	If so when?			
EDUCATIONAL PREPARATION					
High School	_Location	Graduation Date			
College/University	LocationGraduation Date				
Major(s)	Major(s)Minors				
CHSAA CertifacationWhen completed?					
First AidExpiresCPRExpires					
Other coaching and/or certifications					
SPORTS PARTICIPATION					
High School	Years	<u>Letters/Honors Earned</u>			
					
	.				

College/University	<u>Years</u>	Letters/Honors Earned			

List coach	ing experience(s) – includ	le win/loss reco	rd, championships and coac	hing honors received:
	*			
List at leas	st five references who are	knowledgeable	of your coaching qualification	ons:
Name Name	Present Address	<u>Title</u>	Relation to Your Work	
automatic bar trace, color, reli	gion, creed, sex, national origin, disabil ture below indicates that I	only as it relates to the jity, sexual orientation, o	ob in question. We consider applications sitizenship or any other legally protected solution accurately nation herein is cause for terms.	and truthfully. I
	DO NOT WRITE IN	N THIS SPACE -	- FOR ADMINISTRATIVE	USE ONLY
Assignme	nt(s)			
Approval	Date:			11
Signature	of approving administrate	or		Date
Signature	of School Board President			Date
Signature	of School Board Secretary	<u></u>		Date
Salary Ste	p Salary			