

EAST HADDAM PUBLIC SCHOOLS
Application for Coach/Athletic Coordinator
2019-2020 SCHOOL YEAR

Name: _____ Current School (if applicable): _____

Home Address: _____

Coaching Position applying for: _____
(Please specify Varsity/JV and if applying for Head Coach, Asst. Coach, or Volunteer Coach)

Please answer the following questions:

1. Qualifications/Previous Coaching Experience:

2. List three positives from this past season (team / individual):

3. List 3 areas of improvement focus (team / individual):

4. Improvement plans for upcoming years:

5. Results statement: What will be different?:

6. I have read the coaches handbook, dated 6/18/2018: Yes _____ No _____

Signature, Applicant

Date

REQUIRED:

Connecticut State Department of Education Certification EIN Number (Must have #600 endorsement code): _____ Expires: _____ <i>(Please Attach Copy)</i>
<i>For more information on state coaching requirements:</i> http://www.sde.ct.gov/sde/cwp/view.asp?a=2613&q=321282

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Recommend approval: <input type="radio"/> Yes <input type="radio"/> No
_____ Signature, Athletic Coordinator Date

Recommend approval: <input type="radio"/> Yes <input type="radio"/> No
_____ Signature, Principal Date

Recommend approval: <input type="radio"/> Yes <input type="radio"/> No
_____ Superintendent of Schools Date

_____ STIPEND RATE OF PAY
