



(707) 774-2944
Email: quesjrob@gmail.com

STAFF APPLICATION

Follow us on FACEBOOK:
www.facebook.com@vallejojrredhawks.com

Please provide copy the following fee with applications:

\$5 Staff Fee for Badge

What position are you applying for? FOOTBALL – CHEER

(circle one) / **SPRING – FALL (circle one) FIRST CHOICE SECOND**

CHOICE

Head Coach Assistant Coach Head Coach Assistant Coach Team Parent Coach

Trainee Team Parent Coach Trainee

Division of Play: Division of Play:

Junior Division Starts Rookie JV Varsity Junior division Starts Rookie JV Varsity

Do/Will you have a child on this team?

YES NO – (circle one)

APPLICANTS INFORMATION: (PLEASE PRINT CLEARLY)

_____ MI
Last Name First Name

_____ City _____ Zip
Street Address

(_____) _____ Work (_____) _____
Home Phone Phone Cell Phone Or Pager

_____ Employer _____ Email Address
Occupation

COACHING EXPERIENCE:

Years experience coaching youth football/cheer or any other sport: _____

Where did you coach? _____
Organization Name Location

Coaching Reference: _____
Individuals Name Contact Phone Number

Personal Reference: 1) _____ Name
Contact Phone Number

Personal Reference: 2) _____ Name
Contact Phone Number



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MEDICAL CONDITIONS:

PERSONAL BIO: (Provide no less than two (2) sentences about yourself and why you want to coach youth sports. (Use additional paper if needed.)

BACKGROUND INFO: (Working with youth is a privilege and we want to ensure the safety of all our participants. Although the following may not be held against you, it helps us to determine if you are fit to work with our youth.) Have you ever been convicted of a felony?
YES NO (circle one) If yes, when? _____ If yes, please explain _____
Would you object to a
background Check? YES NO (circle one)

To the best of my knowledge, all information given on this form is factual. I understand that the league will take disciplinary action against the individual, team and Association that presents falsified information on documents. I've also read the code of conduct and will follow it to the best of my ability and understand that by not doing so, I could forfeit my coaching assignment if I violate any of the rules. **SIGNATURES:** Coach (Applicant) _____
Athletic Director _____ Date Signed _____ Date _____
Signed _____

DO NOT WRITE BELOW THIS LINE – Authorized Personnel Only

Approved: YES NO (circle one) Position Approved for: _____ **A.D. Signature:** _____
_____ **Date:** _____ **President Signature:** _____
_____ **Date:** _____