



Newport-Mesa Jr. All American Football Coach's Application

All persons directly involved with a team in any coaching capacity must complete this form, in its entirety, and have it approved by the Board of Directors before assuming any duties.

Date: _____

Name: _____

Home Address/City/State/Zip Code:

Home Phone No. (____) _____ Home Fax No. (____) _____

Employer: _____

Employer Address/City/State/Zip Code:

Office Phone No. (____) _____ Home Fax No. (____) _____

E-Mail Address _____

Normal Work Hours/Description of Schedule:

Health Insurance Carrier _____

Social Security Number _____

Age _____ Date of Birth _____

What position do you desire? (Head Coach, Asst. Coach, etc.)

Which division preferable?

Jr. Clinic (7-8 yrs) _____

Clinic (9-10 yrs) _____

Jr. Pee Wee (10-11 yrs) _____

Pee Wee (11-12 yrs) _____

Jr. Midget (12-13 yrs) _____

Midget (13-14 yrs) _____

Coaching experience (include organization with contact person, date, age group:

Have you ever been removed/suspended from your coaching duties?

Yes _____ No _____

If yes please explain:

Have you ever registered under section 290 of the California Code? _____ (Write in answer).

Have you ever been convicted of any misdemeanor(s) or felony(s)? _____ (Write in answer). If so, please explain:

Do you advocate the overthrow of the United States by force or violence, or are you affiliated with any organization or person that does?

Please describe your philosophy of coaching:

Please explain why you want to coach for NMJAAF:

Please list-playing experience:

List three (3) to five (5) references with telephone numbers:

	Name	Phone No.
1.		
2.		
3.		
4.		
5.		

Signature

Date