

**COACHING APPLICATION FORM
ST. DOMINIC SCHOOL ATHLETIC ASSOCIATION**



(Please Print)

Name: _____

Address: _____

E-Mail _____

Phone: Home: _____ Work: _____

I am applying for: ____ Head Coach ____ Assistant Coach

Sport _____ Grade Level _____

Son's/Daughter's Name: _____

Previous Coaching/Playing Experience, Other Relevant Youth Supervision Experience,
Reasons For Wanting to Coach (Please use other side of this form if additional space needed):

I have attended a "Protecting God's Children" Workshop: YES: NO:

I am trained in usage of an AED and in CPR: YES: NO:

As a St. Dominic coach, I agree to submit to a background check required by the Joliet Diocese, if requested. I further agree to abide by the guidelines and rules as set forth by St. Dominic School Athletic Association Handbook and the Athletic Policy, the Joliet Diocese and the League governing the individual sport.

Signed _____

Date _____

Note: (1) Copies of the Athletic Association Handbook, Diocesan Policy and League guidelines and rules are available upon request.

(2) All coaching applications are reviewed by the Sports Coordinator and Athletic Director. Recommendations are submitted to the Athletic Board for final approval.