

EDMONDS SCHOOL DISTRICT NO. 15

Department of Athletics
20420 68th Avenue West, Lynnwood, WA 98036
(425) 431-7153

APPLICATION FOR COACHING ASSIGNMENT

Name Last First Middle

Address Street City State Zip

Home Phone ( )

Place of Employment Bus. Phone ( )

Position(s) Applying For:

- Cross Country Football Soccer Swimming Tennis Volleyball
Basketball Wrestling Baseball Golf Fastpitch Track & Field
Cheerleader Dance/Drill Diving

List Education:

Table with 4 columns: School Attended, Dates, Course of Study, Degree

List Athletic Participation Experience and Years:

Blank lines for listing athletic participation experience and years.

Will you voluntarily participate in an inservice program which will lead to the coaches' standard certification? Yes No or currently a WIAA certified coach at level. Certifying school district is.

Will your present job permit you to be at practice by 2:30 p.m. daily during the season? Yes No List below three references (who can speak to your qualifications as a coach).

Name Bus. Ph. Hm. Ph.
Name Bus. Ph. Hm. Ph.
Name Bus. Ph. Hm. Ph.

State your coaching philosophy:

Blank lines for stating coaching philosophy.

# W.I.A.A. COACHING STANDARDS

**For Office Use Only**

Coach's Name \_\_\_\_\_ Certification Level \_\_\_\_\_

Address \_\_\_\_\_  Male  Female

\_\_\_\_\_ Age: 21 years or older (circle one) Y N

Phone: H ( ) \_\_\_\_\_ W ( ) \_\_\_\_\_

SCHOOL COACHING EXPERIENCE (one year per line - use separate sheet if necessary)				
Fall = F; Winter = W; Spring = S				
Paid <small>Yes or No</small>	Season	Year <small>(one year per line)</small>	School, City, State	Sport/Position <small>(Head or Assistant i.e. Football/Head)</small>
N	F	1989	(EXAMPLE) Cascade High; Everett, WA	Head Football

CLOCK HOURS				
Course ID	Description	Category	Date	Hours

Additional information may be attached. Coaches\Application.wpd

Signature: \_\_\_\_\_ Date: \_\_\_\_\_