

# SHAKER HIGH SCHOOL COACHING APPLICATION

\_\_\_\_\_  
(Name) (Date)

\_\_\_\_\_  
(Full Address)

\_\_\_\_\_  
(Home Phone) (Work Phone) (Cell Phone) (E-mail address)

Position applying for: \_\_\_\_\_

High School Attended: \_\_\_\_\_ Degree & Year: \_\_\_\_\_

Please list any high school sports played: \_\_\_\_\_

\_\_\_\_\_  
(including level, number of years played, etc.)

Undergraduate College: \_\_\_\_\_ Degree & Year: \_\_\_\_\_

Please list any college sports played: \_\_\_\_\_

\_\_\_\_\_  
(including level, number of years played, etc.)

Graduate School: \_\_\_\_\_ Degree & Year: \_\_\_\_\_

Special training (Such as Coaching Clinics, courses, etc.): \_\_\_\_\_

Are you a Certified Teacher? Yes \_\_\_\_\_ No \_\_\_\_\_ Subject \_\_\_\_\_

Number of years Teaching: Years: \_\_\_\_\_ Subject: \_\_\_\_\_

Are you a Certified Coach? Yes \_\_\_\_\_ No \_\_\_\_\_ Sports \_\_\_\_\_

Are you currently certified in First Aid? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you currently certified in CPR? Yes \_\_\_\_\_ No \_\_\_\_\_

Coaching Experience:  
Sport                      Position & Level                      Where                      Number of Years

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

Return to: Athletic Department  
Shaker High School  
445 Watervliet-Shaker Road  
Latham, NY 12110