

Coaching Application

Application Instructions:

1. Complete all areas of this form
2. Attach or email all required documents
3. Applications must be received not later than the posted deadline to be considered

Mail or Email all Materials to:

Michael J. Markwica or
Superintendent
Johnsburg Central School
165 Main Street
North Creek, NY 12853
mmarkwica@johnsburgcsd.org

Candice Husson
Superintendent
Minerva Central School
1466 Co. RTE 29
Olmstedville, NY 12857
Hussonc@minervasd.org

APPLICATION INFORMATION

First Name:		
Last Name:		
Street Address:		
City:	State:	Zip:
Phone Number: Home	Cell	
Email Address:		
Date of Birth:	Teach I.D. #	
Employer:	Occupation	

EDUCATION

	Name of Institution	Dates Attended	Date Graduated	Degree
High School:				
Undergraduate:				
Graduate:				
Other:				

COACHING EXPERIENCE

	Sports Coached	Year	Level	Coaching Position	Number of Years

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ATHLETIC EXPERIENCE

Sport Played	Level	Position(s)	Number of Years

REFERENCE

Name	Job Title	Telephone Number

Please mark the sport(s) you are interesting in coaching:

COACHING INTEREST/CERTIFICATION

SOCCER

☐ CERTIFIED

CERTIFIED

☐ BOYS

☐ VARSITY

☐ GIRLS

☐ MODIFIED

BASKETBALL

☐ CERTIFIED

☐ BOYS

☐ VARSITY

☐ GIRLS

☐ MODIFIED

BASEBALL

☐ CERTIFIED

☐ BOYS

☐ VARSITY

☐ GIRLS

☐ MODIFIED

TENNIS

☐ CERTIFIED

☐ BOYS

☐ VARSITY

☐ GIRLS

☐ MODIFIED

CROSS COUNTRY RUNNING

☐

☐ BOYS

☐ VARSITY

☐ GIRLS

☐ MODIFIED

NORDIC SKIING

☐ CERTIFIED

☐ BOYS

☐ VARSITY

☐ GIRLS

☐ MODIFIED

SOFTBALL

☐ CERTIFIED

☐ BOYS

☐ VARSITY

☐ GIRLS

☐ MODIFIED