School _						
Sport			Sc	School Year: 20 20		
List all v	rolunteers working in your p	rogram and ch	eck all boxes	s that apply.		
Volunteer Name		Substitute License Completed	HR Approved	AHSAA Coaching Requirements Completed	Principal Approval	
All volu	nteer coaches in the Mobile	County Publ	lia Sahaal S	vetom must:		
1. 2. 3. 4. 5. 6. 7. 8. 9.	Obtain an MCPSS Sub License with HR Approved fingerprint and background check with HR Sports First Aid Health and Safety for Coaches (ASEP or PREPARE) Fundamentals of Coaching from NFHS NFHS Sportsmanship course NFHS Concussion course NFHS Sudden Cardiac Arrest course Active CPR certification and AED training Student Mental Health and Suicide Prevention AD (Athletic Director) and Principal approval					
	teer coach is defined as any athletes.	y non-faculty	member wh	o works with	our	
Signatur	e of Principal					
				Date		
Signatur	e of Athletic Director					

A copy of this form should be completed on each volunteer coach.

Please email a copy to both addresses rlowell@mcpss.com & lladner@mcpss.com & rlowell@mcpss.com <a href="mailto:rlowell@mcpss.c