

Delano Union School District
Classified Coach Employment Application
1405 – 12th Avenue - Delano, California 93215
(661) 721-5000 ext. 00162

Received:
 _____ HR Staff
 _____ Supervisor
 _____ HR Staff
 _____ Incomplete

Date: _____

Please check box of position(s) applying for:

SCHOOL SITE:

- | | | |
|--|---------------------------------------|-------------------------------------|
| <input type="checkbox"/> Athletic Director | <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Track |
| <input type="checkbox"/> Baseball/Softball | <input type="checkbox"/> Football | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Basketball | <input type="checkbox"/> Soccer | <input type="checkbox"/> Wrestling |

Name, Last _____ First _____ Middle _____

Street Address _____ City _____ State _____ Zip _____

Mailing Address _____ City _____ State _____ Zip _____

Preferred method of contact: Phone Call Text Email

Home Phone _____ Cell Phone _____ Email Address _____

Do you have a California Driver's License? Yes No (If yes, attach copy of California Driver's License).

Previous employment with the Delano Union School District? Yes No If Yes, give date _____

If currently employed with the Delano Union School District, your position _____

Presently employed? Yes No May we contact your employer? Yes No

Have you ever been cited or convicted of any misdemeanor or felony? Yes No (If yes, attach a detailed letter of explanation for each conviction that includes dates, locations, offenses, convictions, and sentences).

Education: Did you graduate from high school? Yes No GED (If yes, submit original diploma upon submission).

Did you graduate from college or technical school? Yes No (If yes, submit original degree/certificate upon submission). ***Please note, all diplomas and/or transcripts are subject to verification of accreditation.**

First Aid and Emergency Procedures

Valid First Aid Card (attach copy) OR course will be completed on: _____

CPR Card (attach copy) Expiration: _____ OR course will be completed on: _____

Do you have any relatives who are currently employed by the District? Yes No (If yes, list all names of relatives employed by the District or serving on the Board of Trustees. Include names, positions held, and work sites. Attach a list if needed).

References: Please provide the name, address, and phone number of three references who are not related to you. (DO NOT list any of the following: current members of the Board of Trustees, Superintendent or current supervisors of the open position).

Name	Address and Phone Number	Position or Relationship

Employment History:

Start with your present job. Include military service and volunteer activities.

1. Employer _____ Address _____ Phone _____ Job Title _____ Supervisor _____ Work Performed _____ Dates Employed From _____ To _____ Hourly rate/salary-Starting _____ Final _____
2. Employer _____ Address _____ Phone _____ Job Title _____ Supervisor _____ Work Performed _____ Dates Employed From _____ To _____ Hourly rate/salary-Starting _____ Final _____
3. Employer _____ Address _____ Phone _____ Job Title _____ Supervisor _____ Work Performed _____ Dates Employed From _____ To _____ Hourly rate/salary-Starting _____ Final _____

If more space is required, please continue on a separate sheet of paper.

CALIFORNIA CODE OF REGULATIONS TITLE 5 REQUIRES:

Coaching Theory and Technique as Evidenced By.

Please check the box that applies:

- Prior service as an athlete coach or assistant athletic coach in the sport to be coached.

Name of Supervisor: _____ Phone Number: _____ Year: _____

Describe Experience: _____

OR

- Work in community athletic programs in the sport to be coached.

Program: _____ Phone Number: _____ Year: _____

Describe Experience: _____

OR

- Completion of in-service program arranged by a school district or county office of education.

Program: _____ Phone Number: _____ Year: _____

Describe Experience: _____

OR

- Completion of college-level course in coaching theory and techniques

College: _____ Course Title: _____ Instructor: _____ Year: _____

OR

- Participating in organized competitive athletics at high school or above in the sport to be coached.

School: _____ Organization: _____ Year: _____

Describe Experience: _____

Knowledge of Rules and Regulations of the Sport or Game to be Assigned

Yes No

Adolescent Psychology

Please check the box that applies:

Adolescent psychology as it relates to participation in sports, as evidenced by:

Successful completion of a college-level course in adolescent (child) psychology.

College: _____ Course Title: _____ Year: _____

OR

Completion of seminar/workshop on Human Growth and Development of Youth.

Seminar/Workshop Title: _____ Presenter: _____ Year: _____

OR

Prior active involvement with youth in school/community sports program.

Name of Program: _____ Activity: _____ Year: _____

Describe Experience: _____

References

“The Applicant agrees that this employer may contact any prior employer listed on this form and agrees that this employer may inquire as to job performance and reason(s) for departure. The Applicant further agrees that this employer may decline to consider this application further if one or more of the Applicant’s prior employers refuse to fully answer any of this employer’s questions about job performance and reason(s) for departure. This application constitutes a written waiver and may be presented for that purpose to any prior employers.”

Agreement

I, certify that the information given herein is true and complete to the best of my knowledge. I authorize the investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I understand that this application is not, nor is intended to be, a contract of employment. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge from the Delano Union School District. Any applicant who attempts to directly contact individual Board Members with the intent of influencing the decision of the Board will be considered disqualified from candidacy for this position.

Applicant Signature: _____ Date: _____

Delano Union School District is an Affirmative Action Employer. Applicants are considered for all positions without regard to race, color, religion, gender, national origin, age, marital or veteran status, or the presence of a non-related medical condition or handicap.

For Office Use Only

First Aid _____ CPR _____ Diploma/GED/H.S. Transcripts _____

Coaching Theory and Technique _____ Knowledge of Rules and Regulations _____

Adolescent Psychology _____ Date Verified _____ Verified by _____