



# Franklin County Sandlot Football

## FOOTBALL COACH APPLICATION

### NAME (Please PRINT in all following blanks)

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

### ADDRESS

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

### PHONE

Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

### DESIRED COACHING POSITION:

HEAD \_\_\_\_\_ ASSISTANT \_\_\_\_\_

EAST \_\_\_\_\_ WEST \_\_\_\_\_

6 \_\_\_\_\_ 7 & 8 \_\_\_\_\_ 9 & 10 \_\_\_\_\_ 11 & 12 \_\_\_\_\_

### FCSFA FOOTBALL LEAGUE HISTORY

How many years have you coached in the FCSFA in the following divisions?

6 \_\_\_\_\_ 7 & 8 \_\_\_\_\_ 9 & 10 \_\_\_\_\_ 11 & 12 \_\_\_\_\_

### COACHING AND PLAYING EXPERIENCE

(Include any playing or coaching experience and dates of same)

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### NATIONAL YOUTH SPORTS COACHING ASSOCIATION CERTIFICATION (NYSCA):

Are you certified with the NYSCA? Yes \_\_\_\_\_ No \_\_\_\_\_

Member # \_\_\_\_\_ Exp. Month \_\_\_\_\_ Year \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_