

2011-2012 JUNIOR HIGH/MIDDLE SCHOOL FALL COACHES INFORMATION FORM

This form **MUST** be completed by the coach and not by a school athletic department staff member. Please return completed form to your athletic director.

School _____ Sport _____

Position:

...Head Coach

...Co-Head Coach

PLEASE PRINT!!

Name _____ SS# _____

Address _____

City _____ State _____ Zip Code _____

E-Mail Address _____

Home Phone _____ Work Phone _____ Cell Phone _____

Are you a District employee? If so, where? _____

If you are a new coach to the district or you have coached in the district in the past but did not coach during the 2010-2011 school year and YOU ARE NOT AN EMPLOYEE, you must complete a release form for background investigation.

If you are a new hire, have you completed this release form? _____

Thank you for your time.

**THIS FORM MUST BE RETURNED AND RECEIVED BY THE
DISTRICT ATHLETIC OFFICE BY FRIDAY, SEPT. 16, 2011**