West Perry School District 2606 Shermans Valley Road

2606 Shermans Valley Road Elliottsburg, PA 17024 (717) 789-3934

DIS	TRICT USE
	ACT 34 ACT 114 ACT 151 TB TEST

COACHING APPLICATION

ersonal Information Date:			
Name:			
Name:(Last)	(First)		(M.I.)
Address:			
(Street)	(City)	(State)	(Zip)
Home Phone:	Cell Phone:		····
Email:	Social Security Number	er:	
Criminal History			1
for each conviction provide a date of o	all questions. If you answer "Yes" to any q conviction and disposition, regardless of th bar to employment in all cases. Each case	e date or location o	f the occurrence
<u>Criminal Offense</u> includes felonies, mis contendere" (no contest).	sdemeanors, summary offenses and conv	ictions resulting fron	n a plea of "nolo
Conviction is an adjudication of guilt an results in a fine, sentence or probation.	d includes determinations before a court, a	district justice or a	magistrate, which
You may omit: minor traffic violations, court or under a Youth Offender Law, successfully completed an Accelerated F	offenses committed before your 18th birthd and any convictions which have been ex Rehabilitative Disposition program.	ay which were adjud opunged by a court	icated in juvenile or for which you
Were you ever convicted of a criminal offense?			[] Y or [] N
Are you currently under charges for a criminal offense?			[] Y or [] N
Have you ever forfeited bond or collateral in connection with a criminal offense?			[] Y or [] N
If you answered yes to any of the when and where convicted and di	above, please describe the crime - sisposition of the case.	tate nature of the	crime(s),
	,		

Coaching Experience					
Please specify which sport you ar	e interested in coaching:				
Did you participate in this particula	ar sport in college?				
Have you coached this particular	sport at West Perry ?	· · · · · · · · · · · · · · · · · · ·			
How many years experience (West Perry or other)? Jr. High level: Sr. High level:					
Do you have PIAA officiating expe	erience in this particular sport?				
Why do you feel you would be a g	ood candidate to work with our stu	udent athletes?			
Deference					
References					
Name	Address & Phone	Relationship			
e					
	•				
		·			
Certification and Signature					
I certify that all of the statements made by in good faith. I authorize investigation of necessary in arriving at an employment d sufficient cause for: 1) rejecting my cand employment.	all statements contained in this application lecision. I understand that any misrepres	on for employment as may be deemed sentation of information shall be			
Furthermore, I understand I must provide one year after issuance) prior to employmented this data in full.					

Signature (must be original in ink)

(Date)