

Jersey Shore Area School District

LEARNING | GROWING | SUCCEEDING

Coaching Application William H. Mincer, Athletic Director, CAA

For which coaching position are you applying?	
Name:	Date:
Address:	
Telephone: (Home) (V	Work): Email:
Have you ever been interviewed at Jersey Shore bef	fore: Yes No
If yes, with whom did you interview?	
Are you currently employed by the Jersey Shore Ar	ea School District: Yes No
If yes, current assignment:	
If no, present employer:	
Does your work permit you to be at practice by 3:30	0? Yes No
List Educational training/degrees:	
What other work experiences have you had which v	would additionally qualify you for this position?
What contributions do you think you could make to	the Jersey Shore Athletic Program, and this particular team?
Would you accept a volunteer position? Yes	No
List two references that have intimate knowledge of	f your ability to perform in the position for which you are applying.
Name:	Phone:
Address:	
Name:	Phone:
Address:	
	Office Use Only
Clearances: Act 34 Act 151 Act 114	Sudden Cardiac Arrest Certification Concussion Awareness Certification