

# NORTH COUNTRY MAVERICK COOP

## ~ COACHING APPLICATION ~

Name: \_\_\_\_\_ Date of Application: \_\_\_\_\_  
 Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Coaching Position Being Applied For: \_\_\_\_\_

Do you have a valid First Aid Card? \_\_\_\_\_ Do you have a valid CPR Card? \_\_\_\_\_

Are you certified by the Montana High School Association's Coaches Education Program? \_\_\_\_\_

### Professional Preparation

Institution	Date	Major	Degree

### Coaching Experience

School/Organization	Date	Position

Philosophy Briefly explain your coaching philosophy as it applies to the following.

Value of Athletics:

Treatment of Athletes:

Sportsmanship:

### References

Name	Position	Phone Number

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\*\* Return this application to North Country Mavericks Coop Board Chairman\*\*