



MHA Youth Sports Coach Application

Head Coach Assistant Coach

Personal Information

Last Name, First, MI: Click or tap here to enter text.		Shirt Size Choose an item.
Address: Click or tap here to enter text.		City: Click or tap here to enter text.
		Zip: Choose an item.
Phone:	Alternate phone:	Preferred email: Click or tap here to enter text.
DOB:	Active Duty <input type="checkbox"/>	Additional email: Click or tap here to enter text.
	Rank: Click or tap here to enter	
Sex: Male <input type="checkbox"/> Female <input type="checkbox"/>	Education Level: Choose an item.	

Coaching Information

Sport Applying For: Choose an item.	Preferred Age Group: Choose an item.	Child in program? <input type="checkbox"/> Name: _____
List any formal coaching training: Click or tap here to enter text.		
List any informal coach training: Click or tap here to enter text.		
Describe Coaching &/or Playing Experience: Click or tap here to enter text.		
I have read and understand the National Alliance for Youth Sports "Coaches Code of Ethics " and I understand/accept the obligations and responsibilities of coaching our youth:		
Signature: _____		Date: Click or tap to enter a date.

Personal References

Name: Click or tap here to enter text.		
Address: Click or tap here to enter text.		
Phone:	Alternate phone:	E-mail: Click or tap here to enter text.
Relationship: Click or tap here to enter text.	Office use: Date contacted _____	Response: _____
Name: Click or tap here to enter text.		
Address: Click or tap here to enter text.		
Phone:	Alternate phone:	E-mail: Click or tap here to enter text.
Relationship: Click or tap here to enter text.	Office use: Date contacted _____	Response: _____

Name: Click or tap here to enter text.		
Address: Click or tap here to enter text.		
Phone:	Alternate phone:	E-mail: Click or tap here to enter text.
Relationship: Click or tap here to enter text.	Office use: Date contacted _____	Response: _____
Employment History Attach additional if needed. Last 10 years		
Position	Company	dates
1. Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
2. Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
3. Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

Background Information
Have you ever been arrested for or charged with a crime involving a child? Choose an item. <input type="checkbox"/>
Have you ever been convicted of a felony, violent crime or domestic violence? Choose an item.
If Yes , describe incident, jurisdiction, and adjudication results: Click or tap here to enter text.
Have you ever been arrested for or charged with a crime involving drugs or alcohol? Choose an item.
If Yes , describe incident, jurisdiction, and adjudication results: Click or tap here to enter text.

Consent and Release

By signing this application, I hereby authorize and consent for the MHAFB Youth Program to obtain information regarding my background and history. This may include but is not limited to: my employment records and references; personal references; criminal background records and information; criminal background check and fingerprinting; driver's license check; coaching experience; and other training experience.

I agree to conform to and adhere to the National Standards for Youth Sports, the Youth Sports Coaches Code of Ethics, AFI 34-249 and AFMAN 34-804, MHAFB Youth Sports Policies and Procedures, and to refrain from the use of alcohol, tobacco, and illegal substances during any youth sports event.

I will remember that coaching youth sports is a privilege and not a right. I can be relieved of my coaching duties at any time if I fail to live up to the standards set forth for all youth sports coaches at MHAFB, Idaho.

I understand in order to become a youth sports coach I am required to be certified through the National Youth Sports Coaches Association (NYSCA) or other recognized certifying organization.

I understand I am required to have a completed Installation Records check containing a records check of all installations on which I have lived or worked for 2 years before the date of this application.

I have read and understand the MHAFB Youth Guidance Policy.

Signature

Date [Click or tap to enter a date.](#)