

**EPIPHANY SOCCER LEAGUE  
COACH APPLICATION FORM  
SEASON: \_\_\_\_\_**




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**SECTION A (please print)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

City/Town: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Telephone Home: \_\_\_\_\_ Telephone Business: \_\_\_\_\_

Coaching Position Preferred (Age Group): 1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

Do you have a son/daughter currently playing with the League?  Yes  No

If so, please indicate their name: \_\_\_\_\_

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**SECTION B: Previous Coaching Experience (if applicable)**

If you have coached a sports team in the past, please indicate the: (i) Year(s); (ii) Club; (iii) Age Division in which the team played.

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

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**SECTION C: Coaching Qualifications (if applicable)**

If you have any particular coaching qualifications (such as certificates, licenses, courses, training, etc.) in soccer or any other sport, please list them in the space below and attach a copy of available certificates, diplomas and/or registration cards.

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**SECTION D: Additional Information (if applicable)**

A resume outlining your qualifications for this coaching position may be attached, together with at least three references.

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*I have reviewed and agreed to the role and position (as defined in 'Epiphany Soccer League - House League Coach Position Description') and have accurately completed this application. I authorize the League to conduct a Police Screening on me, if required, and I consent to the release of any information contained in any criminal record and agree to execute such other consents and approvals as may be required.*

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**SECTION E (for League use only)**

Date Received: \_\_\_\_\_

OSA Session: \_\_\_\_\_

Practice Session: \_\_\_\_\_

Resume Attached:  Yes  No