

OAK PARK UNIFIED SCHOOL DISTRICT

818-735-3303 899 N. Kanan Rd. Oak Park, Ca. 91377

OAK PARK HIGH SCHOOL COACHING APPLICATION

NAME				PHONE		
	First	Last		Hom		
ADDRESS				PHONE		
	Street	City	Zip		Cell	
E-MAIL AD	DRESS					
POSITION	APPLYING FOR					
AGE LEVE	LS COACHED					
FIRST AID	/CPR EXPERIENCE/TRA	AING				
		А	ttach copy of curre	nt CPR and/or First Aid	cards	
ATHLETIC	EXPERIENCE					
	AMAADY OF COACHING					
BRIEF SUI	MMARY OF COACHING	PHILOSOPHY				
LIST ALL (COLLEGE LEVEL CLASS	SES RELATING TO	FREATMENT OF A	ATHLETIC INJURIES AI	ND ADOLESCENT PY	SCHOLOGY AND
TEACHING	G CREDENTIAL					
LIST 3 CUI	RRENT REFERENCES:					
Name		A	ddress		Phone	
Name		A	ddress		Phone	
Name		A	ddress		Phone	
HAVE YOU	J BEEN CONVICTED OF	F A MISDEMEANOR	OR FELONY?			
IF YES, EX	(PLAIN					
FINGERPF	RINT VERIFICATION		TB TEST CERTIFICATION			
		Office use			Office	use
Signatu	re of Applicant				Date	