



BLAINE SCHOOL DISTRICT NO. 503

765 H Street
Blaine, WA. 98230
(360) 332-5881 Fax (360) 332-7568

COACHING/EXTRA CURRICULAR APPLICATION

(Please Print or Type)

Name: _____ Soc Sec No: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone No. _____ Alt Phone No. _____

E-Mail: _____ (Optional)

Coaching/Extracurricular Activities Position(s) for which you are applying:

Middle School High School Paid Position Volunteer

Sport(s): _____ Job # _____
(n/a for volunteers)

COACHING PHILOSOPHY

Please describe your philosophy of coaching or advising extracurricular activities:

WIAA COACHING STANDARDS FOR HIGH SCHOOL COACHING POSITIONS

All coaches are required to hold current CPR and first aid certification cards and to participate in WIAA approved in-service/training courses as stipulated by the WIAA Coaches Standards and Education Program.

NOTE: Candidates applying for head coaching positions (high school or middle school) must be 21 years of age or older.

CPR Card: _____ Expiration Date _____
First Aid Card: _____ Expiration Date _____

(Complete and Sign Reverse Side)

COACHING/EXTRA CURRICULAR EXPERIENCE

Dates (Mo/Yr)	Organization or School District	Sport/Activity Position	Supervisor's Name and Phone Number
From: ____/____ To: ____/____			() -
From: ____/____ To: ____/____			() -
From: ____/____ To: ____/____			() -
From: ____/____ To: ____/____			() -

SPORTS PARTICIPATION

Year(s)	Sport	Letters Earned	Level
			<input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Other
			<input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Other
			<input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Other
			<input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Other
			<input type="checkbox"/> High School <input type="checkbox"/> College <input type="checkbox"/> Other

PROFESSIONAL REFERENCES

Name	Title	Employer Name	Phone Number
			() -
			() -
			() -

I authorized the Blaine School District to make any investigation of any personal, educational, vocational or employment history. I further authorize any current or former employer, person, firm or agency to provide Blaine School District with information they have regarding me. I hereby release and discharge the Blaine School District and those who provide information from any application, including any and all liability as a result of furnishing and receiving this information. I further agree that falsification of any part of this application packet, including any accompanying inserts, shall be sufficient cause for dismissal. References and personal information which become part of this application will be regarded as confidential and shall not be revealed to me.

Applicant Signature: _____ Date: _____

Blaine School District is an equal opportunity employer. We prohibit discrimination based on race, color, religion, creed, national origin, gender, marital status, age, pregnancy, or the presence of a disability, or any other basis prohibited by law. The Blaine School District supports the spirit, policies and practices of affirmative action, and has implemented programs to address the diversity of the work force.