



Florida Revolution Soccer Club

Coaching Application for the 2010 - 2011 Season

THIS APPLICATION DOES NOT GUARANTEE YOUR SELECTION AS A COACH. DISCLOSURE OF YOUR SOCIAL SECURITY NUMBER AND BIRTH DATE IS VOLUNTARY, HOWEVER, YOUR APPLICATION WILL NOT BE PROCESSED WITHOUT THIS INFORMATION. FYSA WILL RUN A BACKGROUND CHECK ON ALL CANDIDATES BY USING THE SSN INFORMATION. YOUR SELECTION AS A COACH WILL DEPEND ON THE OUTCOME OF THIS INVESTIGATION AS WELL AS THE DETERMINATION OF THE EXECUTIVE COMMITTEE. PLEASE PROVIDE A COPY OF YOUR DRIVERS LICENSE.

Boys Girls Age Group U - _____ DIV I DIV II DIV III

Personal Information:

Last Name		First Name		MI	Social Security #
Address			City	Zip Code	Birth Date
Home Phone	Work Phone	Cell Phone	E-mail Address		Male <input type="checkbox"/> Female <input type="checkbox"/>

Qualifications:

Years experience as coach		At what level?
Years experience as player coach		At what level?
Last year's coaching exp	Coaching license level	Coaching license number

Coaching Philosophy: (Use the back of the form if necessary)

Please list four (4) personal soccer related references:

Name	
Title	
Phone	

Name	
Title	
Phone	

Name	
Title	
Phone	

Name	
Title	
Phone	

Personal Disclosure Information*:

1. Have you ever been arrested, convicted or pleaded guilty to a crime?
YES NO
2. Have you ever been accused, charged, or alleged to have, or have you ever committed any act of neglecting, abusing or molesting any child?
YES NO
3. Have you been convicted of the possession, use or sale of drugs within the last seven years?
YES NO
4. Have you been released from incarceration for a conviction of the possession, use or sale of drugs within the last seven years?
YES NO
5. Is there any fact, circumstance, or pattern involving your background that would make it inappropriate for you to serve with minors or would compromise the integrity of Florida Revolution Soccer Club?
YES NO
6. Have you ever been ejected or otherwise disciplined from a youth athletic function due to your conduct as a coach or spectator?
YES NO

For all yes answers please provide a written explanation on back of this form.

Yes answers are not automatic grounds for disqualification.

Applicant's Statement of Release

I recognize that Florida Revolution Soccer Club is relying on the accuracy of the above information to evaluate my application. Accordingly, I attest and affirm that all of the information I have provided is true and accurate. In consideration for my application, I release any individual or organization from any and all liability for any damages which may result to me on account of compliance with this authorization. Should my application be accepted, I agree to be bound by the policies of Florida Revolution Soccer Club and to refrain from unethical and/or illegal conduct in the performance of my services on behalf of the program.

Request for Criminal Records Check and Authorization

Important: Applicants must complete this section to have a valid application. Invalid applications will not be considered.

I hereby request and authorize the release of any information which pertains to any record of convictions contained in law enforcement files or in any criminal file maintained on me whether local, state or national. I hereby release local, state and national law enforcement agencies from any and all liability resulting from such disclosure.

I have carefully read the above release and authorization and understand the contents. I sign this release of my own free will. This is a legally binding agreement that I have read and understand.

Any false statements on this document may be grounds for immediate dismissal from Florida Revolution Soccer Club.

Signature

Printed

Print Maiden Name(s) or Aliases

Any information gained as a result of the release or authorization will only be used by Florida Revolution Soccer Club Florida Youth Soccer or Hillsborough County strictly for the purpose of evaluating this application and conducting disclosed background checks.

Administrative Use Only:

_____ *Completed Application*

_____ *Applicant does NOT appear on Sex Offender Registry*

_____ *Signed Coach's Code of Ethics*

_____ *Approved for requested position*

_____ *Denied for requested position (notes)*

Date Notified _____

Coaches Code of Ethics

- I will never place the value of winning before the safety and welfare of all players.
- I will always show respect for players, other coaches, and I will lead by example, demonstrating fair play and sportsmanship at all times.
- I will demonstrate knowledgeable of the rules of the game, and teach these rules to my players.
- I will never use abusive or insulting language. I will treat everyone with dignity.
- I will not tolerate inappropriate behavior, regardless of the situation.
- I will not allow the use of anabolic agents or stimulants, drugs, tobacco, or alcohol by any of my players.
- I will never knowingly jeopardize the eligibility and participation of a student-athlete.
- Youth have a greater need for example than criticism.
- I will be the primary soccer role model
 - I will at all times conduct myself in a positive manner.
 - Coaching is motivating players to produce their best effort, Inspiring players to learn, and encouraging players to be winners.
- Coach's actions on sidelines during games shall be in the Spirit of "good sportsmanship" at all times. Profanity, profane, gestures, arguing, inciting disruptive behavior by spectators and/or players, or any conduct not in the spirit of good sportsmanship, shall require disciplinary action from the affiliate
- Alcohol, illegal drugs and unauthorized prescription drugs shall not be possessed, consumed or distributed before, during or after any game or any other time at the field and/or game complex

Coach Applicants Signature_____

Date_____