

# Whirlwind Volleyball – 2017/18 Season

## Coach's Application and Information Form

Thank you for your interest in working with Whirlwind Volleyball. This application must be completed by all candidates who wish to be considered for coaching opportunities within our organization.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (MM/DD/YYYY)

Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

Email address: \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State: \_\_\_\_\_ SSN: \_\_\_\_\_

Have you ever been convicted of a crime: Yes \_\_\_\_ No \_\_\_\_ (If yes, please provide details on back of form.)

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This information is required by Whirlwind Volleyball to promote the safety of our athletes and the ensure our program is represented in a professional, ethical and upstanding manner.

Qualifications (list any previous coaching or playing experience): \_\_\_\_\_

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List all current certifications that pertain to this position: \_\_\_\_\_

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My goals and expectations of coaching this club are: \_\_\_\_\_

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Do you have a specific age group you prefer to Coach: 12U 13U 14U 15U 16U 17U 18U

Please list below two (2) people who can attest to your coaching potential:

Name: \_\_\_\_\_ Contact information: \_\_\_\_\_

Name: \_\_\_\_\_ Contact information: \_\_\_\_\_

Please return the above completed application and a short coaching profile including such things as years coaching, awards, honors, playing experience, etc. to: Tracy Manning at: [tmanning753@gmail.com](mailto:tmanning753@gmail.com).