

Application for Employment for Coaching Positions Cochrane-Fountain City High School



Home
District

Please Return Application to: Thomas Hiebert
Athletic Director
Cochrane-Fountain City School District
S2770 State Highway 35
Fountain City, WI 54629

Phone: (608) 687-3312
Fax: (608) 687-3312

Please Type or Print

Position(s) Applying For: _____

Date Available To Begin: _____

PERSONAL DATA

Applicant's Full Name:

_____ Last

_____ First

_____ Middle

Present
Address:

_____ Street

_____ City

_____ State

_____ ZIP

Telephone Number: Home: (____) _____ Work: (____) _____ Cell: (____) _____

Email Address: _____

1. Are you legally authorized to work in the United States? No Yes
2. Have you ever been discharged or requested to resign from a position?
(If yes, please explain on a separate sheet.) No Yes
3. Have you ever pled guilty, or no contest/nolo contendere, to or been
convicted of an ordinance violation (other than minor traffic violations),
misdemeanor, or felony? (If yes, please explain on a separate sheet.) No Yes
4. Have you previously coached at the high school level?
If so, in what capacity? _____ No Yes
5. Are you currently certified to coach in Wisconsin?
If yes, in what areas? _____ No Yes

EDUCATION AND TRAINING

School Name and Location	Did You Graduate?	Degree Type/ Year Received	Major	Minor

EMPLOYMENT HISTORY

Dates of Employment	Employer	Position	Reason for Leaving

ACTIVITY PARTICIPATION/ EXPERIENCE

Activity	School/College	Years Participated	Honors/Accomplishments

COACHING/ADVISING EXPERIENCE

Activity and Level	School/Location	Years Participated	Honors/Accomplishments

Please list any other experiences you have had that may be unique to this coaching/advising position.

Please list 3 references that can speak directly to your coaching or activity background.

Name of Reference	Position or relationship	Mailing Address	Home and Work Phone Numbers
1.			H: W:
2.			H: W:
3.			H: W:

AUTHORIZATION AND RELEASE

I certify that the information provided by me in this application is true and complete to the best of my knowledge. I understand that if false information, omissions or misrepresentations are discovered, my application may be rejected and, if I am employed, my employment may be terminated at any time. I agree that the District shall not be held liable in any respect if my application is rejected or my employment is terminated for this reason.

The Cochrane-Fountain School District is hereby authorized, at the time of my application for employment or during the course of my employment, to obtain from any source, information regarding my education, experience, criminal background, competence, character or medical history as relates to the position for which I applied for or in which I am employed.

I authorize any former employer, school or government agency as well as its officers, agents and employees to release any and all information to the Cochrane-Fountain City School District should the District make a written or oral request for such information. I understand that the employment information my included, but is not necessarily limited to, performance evaluations and reports, job descriptions, disciplinary reports, letters of reprimand and concerns regarding my suitability for employment.

I further, voluntarily and knowingly, fully release and disclaim, absolve, indemnify, and hold harmless such former employers, schools or government agencies as well as its officers, agents, and employees from any and all claims, liabilities, demands, causes of action, damages or costs, including reasonable attorneys; fees, present or future, whether known or unknown, anticipated or unanticipated, arising from or incident to the disclosure or release except for the malicious and willful disclosure or derogatory facts concerning such facts knows are untrue.

The Cochrane-Fountain City School District does not discriminate in hiring or employment on the basis of race, color, religion, sex, sexual orientation, national origin, age, disability, arrest and conviction record, or any other protected characteristic. No questions on this application are intended to secure information to be used in violation of the law. WE ARE AN EQUAL OPPORTUNITY EMPLOYER.

Signature of Applicant _____ **Date** _____