

BOULDER ELEMENTARY

COACHING APPLICATION

PO Box 1346 Boulder MT 59632 Phone:(406)225-4206 Fax:(406)225-9218

Date of Application:	Position you are applying for:	
PERSONAL DATA:		
Name:		
Address:		
Phone:() Message Phone:()	Email:	
Please describe your experience participating	ng in this/these sport(s):	
Please describe your experience coaching in	n this/these sport(s):	
Do you have a current first aid card?	YES NO (circle one)	
Please list three references:		
Name Occupation	Address	Phone Number
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CHILD SAFETY:

Since you are applying for a position that involves cont or school district property, please complete the following	
Have you, within the past seven years, been released from pri assault, rape, child abuse, child molestation, extortion, blackm fraud, stealing, or robbery? If yes, please attach a sep crime.	ail, or any offense that involves drugs, embezzlement,
Do you consent to a fingerprint/background check as required district?	by state and federal laws for employment in a school
In the space provided below, please prepare a brief ha to coach a Boulder Elementary or Jefferson High School	
PREFERENCES: Attach a copy of your DD 214.	
Are you claiming Veteran's Preference? Are you a	disabled Veteran?
RELEASE OF LIABILITY	
I hereby authorize Boulder Public Schools to inquire as to my employers or references with no liability arising there from. I authorize the investigations of all the statements contained in omission of facts called for is cause for dismissal.	hereby guarantee the above information is true. I also
Signature	Date