

***El Cajon National Little League 2016 Regular Season
Manager/Coach Application Form***

Dear Manager/Coach Applicant,

Thank you for your interest in managing and/or coaching an El Cajon National Little League (E.C.N.L.L.) Team for the 2016 regular season.

The El Cajon National Little League program strives to provide all players with an opportunity to participate in a competitive, yet teaching environment. Every effort will be made to promote teamwork, sportsmanship and fair play as the core values for all participants and their families.

All managers, coaches, players, parents, fans and spectators are required to follow Little League International rules & regulations as well as E.C.N.L.L. rules, regulations, policies, code of conduct and to cooperate with the league and its Board of Directors.

To be considered for a position of manager/coach, we ask that you please fill out the attached Manager/Coach Application Form, Volunteer Code of Conduct agreement, and 2016 Little League Volunteer Application (don't forget to include a copy of your driver's license).

You will need to submit all completed forms to the league President on or before *January 09, 2016.*

Thank you for your interest in helping our league.

Sincerely,
Shane Bogajczyk
President
El Cajon National Little League

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To be considered for the position of manager or coach for the upcoming season, **it is your responsibility to complete and return this form to the El Cajon National Little League President on or before *January 09, 2016.***

In addition, you will be required to read, agree and sign the Volunteer Code of Conduct agreement. Please fill out the attached 2015 Little League Volunteer application (don't forget to attach a copy of your driver's license), and attend the required Little League Manager/Coach training session(s) (if applicable).

Position Desired: (Place a 1 in your first selection and a 2 in your second selection)

Manager _____ **Coach** _____

Name:
(Last) _____ (First) _____

Address: _____ **City:** _____ **Zip:** _____

Home Phone:(_____) _____

Cell Phone:(_____) _____

Email address: _____

Level of Interest: Division(s) _____

Have you Previously Managed/Coached an ECNLL team?

___Yes___ No / If yes, what year/division/team? _____

Have you Managed/Coached for any other organized team/sport prior to the upcoming season? ___Yes___ No

If yes, what year/organization/sport? _____

Total Years of Coaching Experience: _____

Do you have one or more children participating in our league? ___Yes___ No

If yes, child's name(s) and age(s):

1. _____ 2. _____

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What is your philosophy with regard to managing/coaching a Little League team?

How will you develop and prepare your team's players for regular season play?

Have you ever been censored, ejected, or suspended from a game or Tournament? If yes, please explain:

Personal references list name and phone number:

Name: _____

Phone:(_____) _____

Name: _____

Phone:(_____) _____