



FOOTBALL COACHES APPLICATION for 2020 Season

(All information provided is confidential)

Circle One: Head Coach Assistant Coach Division: 6U 8U 10U 12U 14U

Name: _____ E-Mail: _____

Address _____

Phone: _____

Football Coaching Philosophy:

Have you coached PC Dolphin Football? _____ Years Coached _____

What level and what capacity (Head, Assistant)?

Have you coached in other youth football leagues? _____ Years Coached _____

What level and what capacity (head, assistant)? _____

Other Sports Coaches what league capacity? _____

Why are you applying for this position?

Please list two personal references (no relatives or other coach applicants)

Name: _____ Ph# _____ Yrs known _____

Name: _____ Ph# _____ Yrs known _____

Please Rate the following: (5 being Highest)

- Your knowledge of the Pop Warner Rule book 1 2 3 4 5
- Your knowledge of the Pop Warner/ TCFC rules regarding minimum play counts/platooning The importance of Winning 1 2 3 4 5
- The importance of good sportsmanship 1 2 3 4 5
- The importance of teaching football technique, fundamentals, and safety regardless of winning. 1 2 3 4 5
- The importance of shaping young people's behavior patterns regardless of circumstances. 1 2 3 4 5
- Willingness to make sure that all rules and administrative duties are followed regardless of circumstance (disciplinary action, incidents reports etc.). 1 2 3 4 5
- Willingness to accept constructive criticism and make Changes as necessary 1 2 3 4 5

If approved as a Head Coach, I understand that I will be required to attend a Football Coaches Clinic and will be or have someone who is certified in CPR and basic first aid at all practices before practice begins. I further agree that if I am approved as a Head Coach, I am responsible for knowing, understanding, communicating to others, and abiding by the Coaches Code of Conduct as set forth by POP WARNER rules and PCYF&C Initials: _____ I understand that my references may be contacted and give PCYF&C my permission to ask questions regarding my character. Initials: _____ I understand that I am not guaranteed to get a Head Coaching position based on this application or any subsequent interview. Initials: _____

Applicant signature: _____

Date: _____

*** COACH APPLICATION, 2020 VOLUNTEER FORM AND COPY OF DRIVERS LICENSE MUST BE INCLUDED**

RETURN APPLICATION
TO: Jay Scarry
PALM CITY DOLPHINS PO
BOX 1792
PALM CITY, FL 34991
Email: jayscarry4@comcast.net

(All applications must be submitted by March 22, 2020)