



THE COVE FC JUNIOR COACHING APPLICATION

SEASON 2018

Name: _____

Mobile: _____

Email Address: _____

Preferred Age Group

Provide in preferential order the junior age group team/s you would like to apply for a coaching position with.

1st Preference _____

2nd Preference _____

Do you have a son/daughter currently playing with our Club? Yes Team _____ No

Coaching Accreditation

Current Coaching Accreditation: _____ FFA Licence Number: _____ Expiry Date: _____

Previous Coaching Experience

1. Year _____ Club _____ Age Group _____ Division _____

2. Year _____ Club _____ Age Group _____ Division _____

3. Year _____ Club _____ Age Group _____ Division _____

PLEASE NOTE: A current police records check is a mandatory requirement of this position and a copy shall be provided upon acceptance of a coaching position offer.

Please attach further information or comments if required.

Signature: _____

Coaching applications are to be sent to tom.ballantyne@thecovefc.com for consideration.