

CLASSIFICATION (check all that apply):

I am presently employed with the Harrison Central School District:

- Physical Education Teacher
 Classroom Teacher
 Substitute Teacher
 Other

I am a former /retired employee of the Harrison Central School District

Employer: _____ Job: _____ Duration: _____

I am not employed by the Harrison Central School District, but my Current Employer is:

Employer: _____ Job: _____ Duration: _____

Do you hold a NYS Teaching Certificate? Yes No Subject(s): _____

PLEASE INDICATE THE POSITION(S) YOU ARE APPLYING FOR:

Season	Sport	Level	Position
Fall	Sport: _____	___ Varsity ___ Jr. Varsity ___ Freshman ___ Modified	___ Head Coach ___ Asst. Coach
Winter	Sport: _____	___ Varsity ___ Jr. Varsity ___ Freshman ___ Modified	___ Head Coach ___ Asst. Coach
Winter	Sport: _____	___ Varsity ___ Jr. Varsity ___ Freshman ___ Modified	___ Head Coach ___ Asst. Coach

A. CERTIFICATION

DO YOU HOLD A VALID TEACHING CERTIFICATE? YES NO SUBJECT(S): _____

First Aid/CPR/AAED (It is your responsibility to have the required certification completed prior to the start of the season)

I hold First Aid and CPR/AED certification (Please attach copies)

B. Coaching Courses (Classroom Teacher and Non-Teacher)

Completed Enrolled
 (check one)

- | | | |
|---|--------------------------|--------------------------|
| 1. Philosophy, Principles & Organization of Athletics in Education
(must be completed within 2 nd year of coaching) | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Health Sciences Applied to Coaching
(must be completed within 3 rd year of coaching) | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Theory and Techniques of Coaching in Education
(must be completed within 3 rd year of coaching) | <input type="checkbox"/> | <input type="checkbox"/> |

C. Additional Courses (All Coaches)

Completed Enrolled
 (check one)

- | | | |
|-----------------------|--------------------------|--------------------------|
| 1. Child Abuse Course | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Violence Course | <input type="checkbox"/> | <input type="checkbox"/> |

D. License Status (Non-Teacher Applicants Only)

I presently hold a temporary coaching license (Please attach copy of license)

I presently hold a professional coaching license issued (Please attach copy of license)

Employment Experience

List most recent experience first. List all prior employers. Use additional sheet if needed. Do NOT OMIT any employment. Failure to list your complete employment record will disqualify you from employment in the Harrison Central School District.

Present Employment

Name & Address of Employer	Supervisor's Name & Title	From		To		Reason for Leaving
		Mo.	Yr.	Mo.	Yr.	
	Phone:					
Your job title:						
Brief description of responsibilities:						

Past Employment

Name & Address of Employer	Supervisor's Name & Title	From		To		Reason for Leaving
		Mo.	Yr.	Mo.	Yr.	
	Phone:					
Your job title:						
Brief description of responsibilities:						

Name & Address of Employer	Supervisor's Name & Title	From		To		Reason for Leaving
		Mo.	Yr.	Mo.	Yr.	
	Phone:					
Your job title:						
Brief description of responsibilities:						

REFERENCES

Provide the names of three persons who have closely observed your work as a professional or as a student. **Do not** include letters of Reference. Recommendations by present and former superintendents, principals and other supervisors are preferred in the case of experienced teachers or supervisors. Beginning teachers will please include practice teaching supervisor's recommendation.

Name of Reference	Position/Relationship	Mailing Address	Phone Number
1.			
2.			
3.			

