



Elba Central School
P. O. Box 370
57 South Main Street
Elba, New York 14058-0370
Phone (585) 757-9967
Fax (585) 757-2713

APPLICATION FOR COACHING POSITION

Gretchen Rosales, Superintendent

PERSONAL INFORMATION

Date: _____

Name: _____
(Last) (First) (Middle)

Permanent Address

Present Address (if different)

Zip Code Zip Code

(_____) (_____) _____
Area Code Permanent Phone Area Code Cell Phone

U. S. Citizen: Yes No

Have you ever been convicted of a crime? Yes No

DESIRED COACHING POSITION(S):

Coaching History

Years (From) (To)	Sport/District
_____	_____
_____	_____
_____	_____

(use additional sheets if necessary)

Education

High School: _____
Name Address

Graduation Date Type of Diploma

College: _____
Name Address

Graduation Date Type of Diploma

Training Received

References

Please list below the name and address of three (3) references:

Name	Address	Telephone
_____	_____	_____
_____	_____	_____
_____	_____	_____

Are your fingerprints on file with the NYS Education Department? Yes No

Social Security Number _____ - _____ - _____

Signature: _____ Date: _____

Elba Board of Education advises all students, parents, employees and the general public that opportunities offered in the through the Elba Central School District are offered without regard to age, sex, race, color, national origin or handicap.

All inquiries relative to compliance for Federal Title IX and Section 504 activities should be directed to Lco gu'Clark, Principal, Elba Central School, P. O. Box 370, 57 South Main Street, Elba, New York 14058-0370. Telephone (585) 757-9967.