

Lakeland Jr. Tackle Volunteer Football Coach Application Form

LJTL Football Coaches' Mission

It is the purpose of the Lakeland Jr. Tackle League (LJTL) to encourage the healthy growth and development of our youth as they learn the fundamentals of tackle football. It shall be the purpose of all LJTL coaches to foster the highest standards of citizenship in the community by all members of the program. They shall provide a safe and positive environment to encourage the growth and development of each student athlete to the best of their ability. They must always reinforce the positive aspects of athletic participation such as having fun, building camaraderie, teamwork, and sportsmanship.

Please Read All Terms and Conditions Carefully

The Lakeland Jr. Tackle League will not discriminate against any person(s) seeking the opportunity to volunteer and participate in any capacity on the basis of race, creed, color, natural origin, marital status, gender, sexual orientation, or disability.

Purpose: This form allows the LJTL Football Board to follow a regimented process for the review and selection of volunteers to fill Head Coach and Assistant Coach positions within LJTL for the upcoming season. Having prior coaching or volunteer experience at any level is not a requirement for application with LJTL Football. Prior to any individual being appointed as a LJTL Football Coach they must submit a completed application, agree to a background check/investigation and interview with the LJTL Coaches and LJTL Football Board.

Privacy Policy: LJTL collects information from coaching applicants for the purposes of determining eligibility and suitability and to conduct background investigations necessary to insure the safety of our participants. We will not collect any information that is not reasonably necessary to participate in this program. Except for the information necessary to conduct background investigations, we will not disclose applicant information to any third party.

Instructions: Please fill out ALL information requested. No person shall be considered for any position within the LGTL Football coaching staff until a completed application is submitted and approved by the LJTL Football Board. Also, by volunteering you agree to follow all rules and regulations as set forth by LJTL Football Board and understand that failure to comply with all rules can result in termination as a volunteer coach. All applications are subject to review and approval by the LJTL Football Board.

Inquiries: Please direct all inquiries about this application to the LJTL Football Board at: Lakelandjrtackle@gmail.com

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APPLICANT'S INFORMATION

Full Name:		Preferred Name:			
Address:					
City:		State:			Zip:
Home Phone:			Cell Phone:		
Personal Email:				Shir	rt Size:
CPR and/or First A	Aid certified?				
If yes, Card level/ Please provide a p	Fitle:	ard with this app	lication.		
Please list any chil	dren you have play	ing in LJTL FOO	OTBALL:		
Child's name:				Age Group:	
Child's name:				Age Group:	
Child's name:				Age Group:	
Position Volunteer	ring for (please che	ck one):			
Head Coach	Assistant Co	oach			
Age Group (please	check one):				
3/4 Grade Team	5th grade Team	6th Grade Tea	um 7th Gr	ade Team	8th Grade Team

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EMPLOYMENT INFORMATION

Employer:	Work Phone:
Address:	
City:	State:Zip:
Occupation/Position:	Years employed:

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QUALIFICATIONS

Football Coaches: Do you have tackle football coaching experience?Yes / No				
Please list the two most recent tackle Football coaching positions you have held:				
From:	To:	Age Group:		
Organization/Location	:			
	eh / Assistant Coach / al):	Other (please explain)		
From:	To:	Age Group:		
Organization/Location	:			
Position: Head Coach / Assistant Coach / Other (please explain) Additional info (optional):				
Have you played footb If yes, please list exper				
Have you officiated fo	otball? Yes / No			

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Please list any experience you may have coaching other sports:	
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Why do you want to be a volunteer coach for LJTL Football?

PERSONAL REFERENCES

Please provide at least three personal references who are not relatives:

Contact Name:	_Phone:
Affiliation:	
Contact Name:	Phone:
Affiliation:	
Contact Name:	Phone:
Affiliation:	

Please feel free to include with this application letters of recommendation from any references.

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BACKGROUND CHECK

Have you ever been refused participation in any youth sports organization? Yes / No

If yes, please explain:

Have you ever been convicted of a felony? Yes / No

Did the conviction deal with a minor? Yes / No

As a condition of volunteering, I give permission for LJTL to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon LJTL receiving no information of inappropriateness in my background. I hereby release and agree to hold harmless from liability the LJTL officers, volunteers, and any other person or organization that may provide such information. I also understand that, regardless of previous appointments, LJTL is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, if I violate any LJTL policies or principles as outlined in the Coaches Conduct / bylaws, or undertake any activity that is deemed by the Board not to be in the best interest of our student athletes or the organization programs, I will be subject to suspension and removal by the LJTL Football Board.

Signature:	Date:
Full Legal Name:	
Date of Birth:	Place of Birth: