



Coach Interest Form

GENERAL

To apply for a NorCal Academy coaching position, or assistant coach, a person must complete and submit the information noted below to the NCA Board for review and approval.

(PRINT) NAME:	DATE:
STREET ADDRESS:	CITY, STATE & ZIP CODE
PHONE:	WORK or CONTACT PHONE:
NFHS COACHING CERTIFICATE: YES / NO	TYPES OF FIRST AID TRAINING:
FROM WHICH STATE: _____	
YEARS OF BASKETBALL COACHING EXPERIENCE:	YOUTH PROGRAMS COACHED: Elementary / Middle School / High School / College OTHER _____
REFERENCE:	CONTACT INFORMATION:
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P.O. Box 4738
 Santa Rosa, CA 95402-4738
 707-548-6551
www.thenorcalacademy.org

PROVIDE GENERAL INFORMATION RELATIVE TO YOUR PHILOSOPHY REGARDING YOUTH SPORTS AND YOUR BASKETBALL EXPERIENCE:

ARE YOU A U.S. CITIZEN: **Yes / No**

HAVE YOU EVER BEEN CONVICTED OF A CRIME OTHER THAN A TRAFFIC VIOLATION: **Yes / No**
(IF YES, PLEASE PROVIDE DETAILS ON A SEPARATE PAGE.)

NOTE ANY ADDITIONAL INFORMATION YOU WOULD LIKE THE ACADEMY TO CONSIDER:

SIGNATURE:

EMAIL ADDRESS:

FOR NORCAL BOARD USE ONLY:

NOTES:

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