



COAST UNIFIED SCHOOL DISTRICT
1350 Main Street • Cambria, California 93428
Tel 805-927-3880 • Fax 805-927-7105
Victoria Schumacher Ph.D., Superintendent

COAST UNION HIGH SCHOOL BRONCOS
2950 Santa Rosa Creek Road, Cambria, CA 93428
805-927-3889 – 805-927-0312 Fax

Andrew Crosby
Athletic Director

Scott Ferguson
Principal

Coaching Application

Applicant Name: \_\_\_\_\_ Date: \_\_\_\_\_

Sports Experience and Participation

High School: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

College: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

College Major(s): \_\_\_\_\_ Minor(s): \_\_\_\_\_

Other Education: \_\_\_\_\_

Please answer the following questions:

Do you hold a valid state teaching credential? \_\_\_\_\_

Do you have a valid CPR/First Aid card? \_\_\_\_\_

Have you completed the CIF Coaching Certification Course or equivalent? \_\_\_\_\_

Coaching Experience and Participation

High School: \_\_\_\_\_ Number of years spent coaching: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

College: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**What experience do you have working with children & young adults? (Include sports, community and recreational work, etc)**

---

---

---

---

**Additional experience/information that you feel should be considered in evaluating this application:**

---

---

---

---

**Athletic Accomplishments**

Have you received any special awards during your athletic career? If so, please specify: \_\_\_\_\_

---

---

---

---

**Notice: Position and stipend is contingent on adequate student enrollment. If there are not enough student players to field a team by week 1 of games then coach will be paid a 20% portion of the stipend for services rendered**

**Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_**