

MESA VISTA CONSOLIDATED SCHOOL DISTRICT

APPLICATION FOR COACHING POSITION

Applicant's Name: _____ Social Security No.: _____

Address: _____

Date of Birth: _____ Home Phone: _____ Work Phone: _____

What Sport are You Interested in Coaching? _____

Do you have a coaching license? _____ If yes, please provide number: _____

(Copy of License Must Be Provided)

EDUCATIONAL BACKGROUND:

High School _____ Year of Graduation: _____

College: _____ Year of Graduation: _____

Graduate Work: _____ Year of Graduation: _____

EDUCATIONAL EXPERIENCE (Teaching):

Check the Following Areas in Which You Have Had Formal Training: (i.e., coursework or workshops)

- _____ Coaching Techniques/Methods
- _____ First Aid
- _____ CPR
- _____ Other _____

- _____ Sports Science
- _____ Sports Medicine
- _____ Sports Psychology

List Prior Coaching Experience:

List the Names and Telephone Numbers of Three People Who Know of Your Coaching Experience:

Name: _____	Phone Number: _____
Name: _____	Phone Number: _____
Name: _____	Phone Number: _____

List Athletic Experience Relevant to this Position or Sport:

If you are not employed by the Mesa Vista School District, please provide the name of your employer, your immediate supervisor's name, telephone number, working hours and responsibilities:

APPLICANT'S SIGNATURE

DATE

MESA VISTA CONSOLIDATED SCHOOL DISTRICT

AGREEMENT, AUTHORIZATION, WAIVER, AND RELEASE

A. Applicant Certification.

I hereby certify that the information contained in this application is true, accurate and complete, to the best of my knowledge and belief. I understand and agree that any misrepresentation or willful omission of facts shall be sufficient cause for disqualification of my application or for termination of my employment. Failure to provide all or part of the information requested may result in the refusal of the School District to further consider me for possible employment.

B. Authorization for Reference Checks.

I hereby authorize the School District and its agents to investigate my work history and education history and to conduct personal inquiries. I understand that the School District will send a copy of this Agreement and Authorization to each individual or entity from whom it is seeking a reference or background information.

C. Waiver and Release as to Reference Checks.

I hereby authorize the party receiving a copy of this signed form (including a photocopy or facsimile copy) to provide and release complete information as may be requested, and I hereby waive any claim of confidentiality I might have with regard to such information.

I hereby release any person or entity providing information or records in accordance with this Agreement, Authorization, Waiver, and Release from any and all claims or liability for compliance.

I AM ALSO WAIVING ANY RIGHT OF ACTION, CAUSE OF ACTION, OR OTHER MEANS OF REDRESS I MAY HAVE AGAINST ANY PERSON OR ENTITY SUPPLYING EMPLOYMENT-RELATED INFORMATION--INCLUDING BUT NOT LIMITED TO INFORMATION CONCERNING MY BACKGROUND, WORK HISTORY, AND DISCIPLINARY HISTORY-- TO THE SCHOOL DISTRICT.

D. Criminal Background Checks.

I understand and agree that if I am considered as a finalist for, or I am actually recommended for or offered employment, I will submit to a criminal background investigation, including mandatory fingerprinting, at my expense, to determine my acceptability for employment. Criminal convictions shall not automatically bar an applicant from obtaining employment with the School District, but pursuant to the Criminal Offender Employment Act of New Mexico (NMSA 1978, §28-2-1, et seq.), such convictions may be the basis for refusing employment. I understand that any employment offer is contingent upon, and expressly subject to, the satisfactory completion of all background checks. **I further understand and agree that if the results of any such background check are not satisfactory in the sole discretion of the District, the District may provide me written notice of the withdrawal of its offer of employment, and that I shall be entitled to no further process or procedure.**

E. Public Disclosure of Applicant Names and Application Materials.

I understand that, pursuant to the Inspection of Public Records Act (IPRA) as interpreted by recent court decisions, the identity of public sector job applicants and the information contained in this application and the information submitted by me or obtained pursuant to this agreement and authorization may be subject to disclosure to persons outside the School District, including the media, to the extent such information is not expressly protected from disclosure by exceptions to the IPRA, or other applicable employee privacy or

confidentiality laws, including but not limited to, the Health Insurance Portability and Accountability Act (HIPPA).
(Results of criminal background checks, if requested are privileged and protected from public disclosure.)

As a result, the applicant must make his or her own decision as to submitting the application and the impact which public disclosure of his or her identity as an applicant, or application materials may have.

Signature of Applicant

Date

Printed Name of Applicant