Text

Description automatically generated with medium confidence

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| **Coach Application Form** | | | |
| Print Name: | | | |
| Home Phone |  | Cell Phone |  |
| Is texting a good way to reach you? | | Yes \_\_\_\_\_\_\_ No \_\_\_\_\_\_\_ | |
| Email Address (please print legibly) | |  | |
| Are you willing and prepared to commit approx. two hours (3:15 – 5:20), once a week, for the entire school year? (We have subs for occasional absences). | | Yes \_\_\_\_\_\_ No \_\_\_\_\_\_ | |
| If “yes,” are there any times during the year when you already know you won’t be available: | |  | |
| Complete this section if you are new or are returning to the Learning Cove after an absence | | | |
| Highest level of education (circle one) | | HS BA MA PhD | |
| Please list any experience you have had working with young children ages 7 to 10 | |  | |
| Have you coached previously for the Learning Cove? | | Yes \_\_\_\_\_\_ No \_\_\_\_\_\_ | |
| If no, how did you hear about the Learning Cove? | |  | |
| Please provide a reference (name, relationship & phone no.) | |  | |
| Complete this section if you were a coach with us last school year | | | |
| How many years have you been coaching with us? | |  | |
| What has coaching at the Learning Cove meant to you personally? | |  | |
| Please sign your full name | | Date | |
|  | |  | |

Please note: An annual security background check will be required. Please return this signed form, the Background Check Permission Form and a copy of your driver’s license to: Attn: The Learning Cove, 5290 Milwaukee Rd., Tecumseh, MI 49826