## LAUREL HIGHLANDS SCHOOL DISTRICT COACHING POSITION APPLICATION

Name:		Date:  Home Phone: ( )  Work Phone: ( )		
Address:				
Position for which you are	applying:			
Indicate School Year for w Past Coaching Experience:			¥ v	
Where:	When:		Position:	
References:				
Name:	Address:		Telephone Number:	
Please write a short paragi back of this application if a	2	d be selected for	r this position: (You may use the	
mandated to be in yo	our file. Your hiring is conting	gent upon submi	s. In addition, a PDE 6004 is ission of these forms. No one will be	
hired or listed for hiring without receipt of these required Clearance forms. There are NO exceptions.  * Please attach valid completion certificates for Cardiac Care and Concussion wise.				
*** If you are recommen	ided for this position by the he	ead coach, pleas	e attach letter of recommendation.	
	rements to Coach in PIAA		ools: education courses from ASEP or	
NFHS in order to be coa completion of courses is a	ching in a PIAA Member S	School. Additional Add	onal information for registration and cessinfo@Human Kinetics.Once	
(Signature)		(Date)		

For Administrative Use Only:		
Act 34 (Criminal History) Act 151 (Child Abuse History) Act 114 (FBI Fingerprint Clearance)		
Concussion Wise Cardiac Wise		3
Required Course		
Name of Course	Completion Date	
Required Course		
Name of Course	Completion Date	

Please attach all required documentation with application
All documentation must be completed and on file in the Superintendent's Office to be considered for board approval. Coaching applications submitted without the proper documents and valid clearances. Please send completed application to:

Laurel Highlands School District Attn: Superintendent's Secretary 304 Bailey Avenue Uniontown, PA 15401