



# Mater Dei Catholic School Coaching Application for Topeka Parochial League



Individuals applying for coaching positions are required to complete the following application. Additional information may be included which might be helpful in evaluating training, experience and qualifications for a coaching position. Please attach any additional information you may think helpful.

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Address: \_\_\_\_\_ Occupation: \_\_\_\_\_  
 Phone: Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
 Children/Grandchildren Attending Mater Dei: \_\_\_\_\_  
 Children/Grandchildren Attending Hayden: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

**Preferred Coaching Assignment (check all that you are interested in):**

Sport	Grade (6th, 7th, 8th)	Head Coach	Assistant Coach
Soccer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Volleyball	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basketball	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Track	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Coaching Preference:**

Boys   
 Girls

Have you attended a Virtus (Protecting God's Children) Workshop? Yes  No   
 Do you hold a valid CPR/AED certification? Yes  No

**Previous Coaching Experience:**

<i>Year</i>	<i>Sport</i>	<i>Association/Team/Club</i>	<i>Age Group</i>	<i>Position (Head/Assistant)</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

**Previous Playing Experience:**

<i>Year</i>	<i>Sport</i>	<i>Association/Team/Club</i>	<i>Age Group</i>	<i>Position Played</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



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*(Coaching Application Continued)*

**List at least three references who are knowledgeable of your coaching qualifications:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
                    *Home*                      *Work*                      *Cell*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
                    *Home*                      *Work*                      *Cell*

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
                    *Home*                      *Work*                      *Cell*

**Briefly describe your coaching philosophy and why you are interested in coaching Mater Dei youth sports:**

**Briefly describe your season plan:**

Please include your goals for the team, your thoughts on rules and discipline and overall player development philosophy as well as any other pertinent information.

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As a Mater Dei coach, I agree to abide by the guidelines and rules set forth by Mater Dei School and the Topeka Parochial League governing the sports and that information given above is accurate. I also understand that in order to coach in the Topeka Parochial League I must have attended a Virtus session on Protecting God's Children.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

*Note: Copies of guidelines and rules are available upon request. Mater Dei Athletic Director(s) review and approve all applications.*