

# Charlton Dudley Youth Football and Cheer

P.O. Box 725, Charlton, MA 01507

cdyfcrams@gmail.com

www.cdrams.com

## 2022 Football & Cheer Coach Application

Full Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ e-mail: \_\_\_\_\_

**Coaching Experience:** (list or attach a coaching resume listing: level of coaching, dates, places and sponsoring organization, list of references)

**Qualifications/accomplishments:** (please list any special certifications, etc.)

**Position Applied For:** (check one)

### Football

Head Coach (21 years or older) [ ]

Asst. Coach (18 years or older) [ ]

### Cheerleading

Head Coach (21 years or older) [ ]

Asst. Coach (18 years or older) [ ]

**Team Applied For:** (circle one)

~~K/1 Flex~~ ~~2/3 Flex~~ ~~Mighty Mites~~ ~~4th Grade~~

~~U6 Cheer~~ ~~U8 Cheer~~ ~~U10 Cheer~~ ~~U12 Cheer~~ ~~U14 Cheer~~

~~5th Grade~~ ~~6th Grade~~ ~~7th Grade~~ ~~8th Grade~~

### Head Coach Requirements

- Active participation and attendance at all games and practices
- ~~Active participation in all other CDYFC related activities~~
- Active participation at all home games after your game
- ~~Expected to work for the betterment of the program on a whole~~
- Capable of interfacing with children on a multi-age level
- ~~Sign and abide by Coaches Code of Conduct~~
- CPR and First Aid Certification
- ~~Annual Mandatory Coaching Classes~~
- Must attend Mandatory Coaching Clinics
- ~~Approved CORI report~~

\_\_\_\_\_ agree to all terms stated above.

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

Signature: \_\_\_\_\_

### Assistant Coach Requirements

- Active participation and attendance at all games and practices
- ~~Active participation in all other CDYFC related activities~~
- Active participation at all home games after your game
- ~~Expected to work for the betterment of the program on a whole~~
- Capable of interfacing with children on a multi-age level
- ~~Sign and abide by Coaches Code of Conduct~~
- Annual Mandatory Coaching Classes
- ~~Must attend Mandatory Coaching Clinics~~
- ~~Approved CORI report~~

\_\_\_\_\_ agree to all terms stated above.

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

Signature: \_\_\_\_\_

\*Anyone wishing to be considered for a position with CDYFC must complete these forms yearly, (NO MATTER HOW MANY YEARS IN THE PROGRAM). Anyone applying for a position will be subject to a Criminal Records Check.

**CORI SUBJECT INFORMATION** (a red asterisk \* denotes a required field)

\_\_\_\_\_  
**\*LAST NAME**                      **\*FIRST NAME**                      **MIDDLE NAME**                      **SUFFIX**

\_\_\_\_\_  
**MAIDEN NAME (or other name(s) of which you've been known)**

\_\_\_\_\_  
**\*DATE OF BIRTH**                      **PLACE OF BIRTH**

\_\_\_\_\_  
**\*LAST SIX DIGITS OF YOUR SOCIAL SECURITY NUMBER** \_\_\_\_\_

**SEX** \_\_\_\_\_ **HEIGHT** \_\_\_\_\_ **ft** \_\_\_\_\_ **in.** **EYE COLOR** \_\_\_\_\_ **RACE** \_\_\_\_\_

**Driver's License or ID Number** \_\_\_\_\_ **State of Issue** \_\_\_\_\_

\_\_\_\_\_  
**MOTHERS MAIDEN NAME**                      **FATHERS FULL NAME**

**CURRENT AND FORMER ADDRESS**

\_\_\_\_\_  
**Street Number and Name**                      **City/Town**                      **State**                      **Zip**

\_\_\_\_\_  
**Street Number and Name**                      **City/Town**                      **State**                      **Zip**

\_\_\_\_\_  
**The above information was verified by reviewing the following form(s) of government issued identification:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Verified by:** \_\_\_\_\_  
**Name of Verifying Official (please print)**

\_\_\_\_\_  
**Signature of Official**