

THE KING'S ACADEMY

1015 S. Ebenezer Road Florence, SC 29501



Phone (843) 661-7464 Fax (843) 661-7647

Coach Application

Personal Information:

Name

Social Security Number

Home Phone

Cell Phone

Fax/E-mail

Mailing Address

Current Employer

Business Phone

May we call you there? Yes No

Do you consider your health adequate for this position?

Yes

No

Have you ever been charged or arrested for a misdemeanor or felony?

Yes

No

Do you have a valid commercial driver's license (CDL)?

Yes

No

If not, are you willing to apply for a CDL?

Yes

No

Spiritual Information:

Name of church currently attending

Pastor's Name

How often do you attend? _____ weekly _____ frequently _____ seldom

Have you accepted Jesus Christ as your personal Lord and Savior? Yes No Date _____

What is God saying to you and doing in your life at the present time? _____

Describe any type of Christian service in which you have been involved. _____

Please share your Statement of Faith on the back of this application.

Sports Information:

What sport(s) are you interested in coaching? _____

Describe any courses, training or experience that you feel qualifies you for this position. _____

Describe your Philosophy of Coaching. _____

What characteristic(s) do you think are vital in the athletic arena? _____

References – Please list four: (2) personal and (2) professional

1. _____
Name Occupation

Address Telephone Number

2. _____
Name Occupation

Address Telephone Number

3. _____
Name Occupation

Address Telephone Number

4. _____
Name Occupation

Address Telephone Number

All coaches representing TKA will submit to The King's Academy Policies and Procedures and adhere to the TKA Coaches Code of Conduct. All coaches representing TKA will adhere to all SCISA rules and regulations.

Signature of Applicant

Date