

Lucas Local Schools Coaching Application



5 First Avenue

Lucas, OH 44843

419-892-2338 x 21301

419-892-1138 (fax)

The Lucas Local Schools considers applicants for all positions without regard to race color, religion, sex, national origin, age, marital or veteran status, the presence of a non-judicial related medical condition or handicap, or any other legally protected status.

First Name:	Middle Initial:	Last Name:		Bırth	_ Birth date:/		
Home Address:		City:		State:	State: Zip:		
ome Address:mail Address:		Cell Phone:		Home	Home Phone:		
Position (s) Applying For:							
How did you hear about this	position? (check all that apply) _	_School PostingN	lewspaper ₋	On-Line _	_ Coach Contact __	Other	
Why are you interested in the	e position (s)?						
Coaching experience: Provid	e sport, location, years, respo	nsibilities and superv	isor of relev	vant coaching	experience.		
1.							
2.							
J							
COLLEGE ATTENDED : (Attended:		
Varsity Sports	Years Active	<u>A</u>	Awards, Lette	rs, Honors?			
1.							
2							
<i>3.</i>							
	es or recreational sports you wer						
	Varsity Sports Years Active		Awards, Letters, Honors?				
2							
2							
J							
HIGH SCHOOL ATTEND	ED: (if applicable)			Dates	Attended:		
Sports	Years Active	A	wards, Letter				
1				<u> </u>			
2.							
3.							
Other High School activ	ities or recreational sports you w	vere involved in:					
Varsity Sports	Years Active				ers, Honors?		
1.							
2							
3							
Employment and/or Educational	Status: Employed:Full-time	Part-timeUnemplo	oyedRetire	ed Student:	Full-time Par	t-time	
	ne, address & phone number of in	-	ide accurate i	nformation abo	out your qualification	ons.	
1							
2							
3							
4							
*	v, OHSAA & Board of Educa	•			_		
be approved for contact with	students: (check all that you	have already obtained	l and submi	t proof to the	Athletic Director)	
☐ HS Diploma or equiva	alent	☐ First Aid/Sport	ts Injury Pre	evention Certi	ificate		
	nd Check - Submit to ODE	☐ Sudden Cardiac Arrest Certificate					
☐ Pupil Activity Permit		f Coaching Certificate					
☐ CPR & AED Certifica	ation	☐ NFHS Concussion in Sports Certif					
	*******		_		de Prevention Ce	rtificata	
		I NEUS Student	iviciliai nea	arui anu Suici	de i fevention Ce	imicate	

<u>Please Note:</u> In order to appear on a Board of Education agenda for approval, all coaches must have all certifications complete!