



**MILL CREEK YOUTH
FOOTBALL LEAGUE**

MCYFL COACHES APPLICATION

Email this completed form to: MCYFLPresident@Gmail.com

Position you are applying for: _____ Head Coach _____ Assistant Head Coach

Division you are requesting to coach in:

_____ Pee Wee _____ 8⁹^{er} _____ Junior _____ Bantam _____ Senior

Contact Information:

Name: _____

Phone (home): _____

Address _____

Phone (work): _____

Phone (cell): _____

Email Address: _____

City

State

Zip

Are you a returning MCYFL Coach: _____ Yes _____ No If 'Yes', which team _____

Have you previously coached youth football: _____ Yes _____ No # of years as Head Coach _____ Assistant _____

Where did you previously coach? _____ Why did you leave? _____

Have you ever coached other youth sports? _____ Yes _____ No # of years as Head Coach _____ Assistant _____

List Sports: _____

Have you ever been ejected or suspended from a youth sports game? _____ Yes _____ No

If 'Yes', please give the details: _____

Are you certified in CPR? _____ Yes _____ No First Aid? _____ Yes _____ No

Are you willing to certify? _____ Yes _____ No

Are you volunteering to coach your own child? _____ Yes _____ No _____ Other / Relative

Reason(s) to Coach in MCYFL: _____



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Other qualifications to coach in MCYFL: _____

What would be reasonable behavior as coach when an official makes what you perceive to be a bad call? _____

The MCYFL does not tolerate profanity of any kind from its players, coaches and spectators. Are you able to meet this expectation as a coach in our program?

References:

- 1. _____ Phone #: (____) _____ - _____
- 2. _____ Phone #: (____) _____ - _____
- 3. _____ Phone #: (____) _____ - _____

WSP Criminal Background Check: ALL of the following information is required and will be used by MCYFL to conduct a personal background check with Washington State Patrol.

Alias / Maiden Name(s), if any: _____

Birth Date: ____/____/____ Sex: ____ Male ____ Female Race: _____

Social Security #: _____ Driver's Lic.#: _____ State: _____

Have you ever been convicted of a crime? ____ Yes ____ No

Have you ever had findings made against you in any civil adjudicative proceeding? ____ Yes ____ No

Have you ever had both a conviction and findings made against you? ____ Yes ____ No

All Coaches (Head and Assistant) will be required to submit to a background check with the MCYFL. Results will remain confidential. I hereby acknowledge that I have been advised that a background check will be made under the Child/Adult Abuse Information ACT.

Signature: _____ Date: _____

MCYFL Use Only:

Checked By: _____ Date Checked: _____

WSP Validation #: _____

____ Approved ____ Rejected ____ Additional Information Required