



Application for Non - Faculty Coach/Assistant Asheboro City Schools

Date _____ **For Office Use Only**
Date Received _____
Requested School _____ Sport(s) _____

Name _____
Last First Middle Maiden

Social Security No. _____ Home Phone No. _____

Business/Work Phone No. _____ Cell Phone No. _____

Permanent Address:

Street City State Zip Code

Education

Name & Location of Institution Dates Major Diploma/Degree

High School _____

College _____

Other _____

Previous Employment (List all employment starting with most current employment first.)

Dates Employed Employer Address/Phone # Job Title Supervisor

PLEASE ANSWER THE FOLLOWING QUESTIONS

1. Do you have a current North Carolina Driver's License? Yes No Driver's License # _____
2. Have you had a drivers' license for at least six months? Yes No
3. Do you have a current NC Bus Drivers' License? Yes No If yes, what county? _____
4. Have you ever been convicted of a felony? Yes No If yes, please explain _____

5. Have you ever been suspended, dismissed, fired or discharged from a position of employment? Yes No
6. Have you ever been subject to disciplinary action during a period of employment? Yes No
7. Have you ever been asked to resign from a position of employment? Yes No
8. Have you ever been convicted, pleaded *nolo contendere* (no Contest), received a prayer for judgment continued, deferred prosecution to any violation of the law other than minor traffic tickets? Yes No
9. Do you have any criminal charges or procedures pending? Yes No
10. Are you a US Citizen or Alien with work Authorization? Yes No
11. If you are a male who is 18 through 25 years of age, are you registered with selective service? Yes No

Previous Employment References (List a minimum of (3) references)

Name	Position	Employer	Phone #

Please use this space below to provide any information that you feel would give additional support to your application: _____

APPLICANT’S WAIVER/RELEASE

I understand that any false information given on the application will be considered sufficient grounds for immediate termination of approval as a non-faculty coach/assistant.

I understand that pursuant to **Asheboro City Board of Education Policy 7240: Drug-Free and Alcohol-Free Workplace, and Policy 7300: Staff Responsibilities**, I am required to report any criminal convictions of drug or alcohol related charges in writing to my supervisor no later than the next scheduled business day. I also understand that per Board Policy 7240, “Conviction” includes the entry in a court of law or military tribunal of: (1) a plea of guilty, *nolo contendere* (no contest or the equivalent); (2) a verdict or finding of guilty; or (3) a prayer for judgment continued (“PJC”) or a deferred prosecution.

I hereby expressly authorize the Asheboro City Board of Education, its agents and employees to make any investigation of my personal or employment history, expressly including, but not limited to federal and/or state criminal, law enforcement or traffic records. I further authorize any former employer, person, firm, corporation, credit agency, administrative body or governmental agency to give the Board of Education, its agents or employees, any information they may have regarding me. In consideration of the review of my application by the Asheboro City Board of Education, its agents or employees, I hereby release the Board of Education and any and all providers of information to whom this release is sent, from any liability as a result of furnishing or receiving this information.

DATE _____ **SIGNATURE** _____

Confidential Reference Form - Non Faculty Coach Asheboro City Schools

_____ has applied to work as a non-faculty coach/assistant in Asheboro City
(applicant's name)

Schools. We would appreciate your completing this reference form and returning it so that we may make a decision on the applicant's ability to fulfill the responsibilities required of non-faculty coaches. The information you provide will be confidential. Thank you.

Part I

(Part I should be completed by the applicant and presented to the reference for completion of Part II)

Two (2) completed reference forms are required.

Name of applicant (printed) _____

School requested _____

Applicant Waiver:

I waive my rights to the information provided in this reference and understand that any information provided is confidential and may not be shared with me.

Applicant Signature _____ **Date** _____

Part II

(Part II is to be completed by the person serving as a reference)

Please note the waiver statement above. To ensure confidentiality, **please complete the reference form and place in an envelope, seal, and write your name across the sealed envelope.** The sealed envelope may be returned to the applicant to submit with his/her application.

Please rate the applicant on the following traits by placing a check in the appropriate column.

	Excellent	Good	Fair	Poor	Not Known
Character					
Dependability					
Initiative					
Maturity					
Judgment					
Quality of Work/Performance					
Honesty and Integrity					
Ability to Work with Others					
Ability to Follow Instructions					
Ability to Accept Criticism					
Concern for Others					
Communication Skills					
Attendance					
Understanding of Children/Youth					
Organizational skills					
Punctuality					

Part II (continued)

How long have you known this applicant? _____

In what relationship? _____

Describe major strengths of the applicant.

Is there any circumstance about the applicant's background that would call into question the advisability of entrusting this person with the supervision and guidance of young people? If so, please explain.

Would you recommend this applicant to work with students as a non-faculty coach in Asheboro City Schools? _____ Yes _____ No

Please include any additional information you deem would be beneficial in consideration of this applicant as a non-faculty coach.

Name of Person Providing Reference _____

Company / Organization _____

Telephone Number _____

Signature _____ **Date** _____

Note to provider of reference: After completing the reference form, please place in an envelope, seal, write your name across the sealed envelope and return to the applicant. If you prefer, you may give the reference directly to the school principal, or you may mail the completed reference form to:

Carla Freemyer, Executive Director for Human Resources
Asheboro City Schools
PO Box 1103
Asheboro, NC 27204

Confidential Reference Form - Non Faculty Coach Asheboro City Schools

_____ has applied to work as a non-faculty coach/assistant in Asheboro City Schools.
(applicant's name)

We would appreciate your completing this reference form and returning it so that we may make a decision on the applicant's ability to fulfill the responsibilities required of non-faculty coaches. The information you provide will be confidential. Thank you.

Part I

(Part I should be completed by the applicant and presented to the reference for completion of Part II)

Two (2) completed reference forms are required.

Name of applicant (printed) _____

School requested _____

Applicant Waiver:

I waive my rights to the information provided in this reference and understand that any information provided is confidential and may not be shared with me.

Applicant Signature _____ **Date** _____

Part II

(Part II is to be completed by the person serving as a reference)

Please note the waiver statement above. To ensure confidentiality, **please complete the reference form and place in an envelope, seal, and write your name across the sealed envelope.** The sealed envelope may be returned to the applicant to submit with his/her application.

Please rate the applicant on the following traits by placing a check in the appropriate column.

	Excellent	Good	Fair	Poor	Not Known
Character					
Dependability					
Initiative					
Maturity					
Judgment					
Quality of Work/Performance					
Honesty and Integrity					
Ability to Work with Others					
Ability to Follow Instructions					
Ability to Accept Criticism					
Concern for Others					
Communication Skills					
Attendance					
Understanding of Children/Youth					
Organizational skills					
Punctuality					

Part II (continued)

How long have you known this applicant? _____

In what relationship? _____

Describe major strengths of the applicant.

Is there any circumstance about the applicant's background that would call into question the advisability of entrusting this person with the supervision and guidance of young people? If so, please explain.

Would you recommend this applicant to work with students as a non-faculty coach in Asheboro City Schools? _____ Yes _____ No

Please include any additional information you deem would be beneficial in consideration of this applicant as a non-faculty coach.

Name of Person Providing Reference _____

Company / Organization _____

Telephone Number _____

Signature _____ **Date** _____

Note to provider of reference: After completing the reference form, please place in an envelope, seal, write your name across the sealed envelope and return to the applicant. If you prefer, you may give the reference directly to the school principal, or you may mail the completed reference form to:

Carla Freemyer, Executive Director for Human Resources
Asheboro City Schools
PO Box 1103
Asheboro, NC 27204