



MILTON STEELERS

NFL YOUTH FOOTBALL LEAGUE Milton Steelers 2018 Volunteer Coach Application Form

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APPLICANT'S INFORMATION

Full Name: _____ Preferred Name: _____
 Address: _____ City: _____
 State: _____ Zip: _____
 Home Phone: _____ Cell Phone: _____

Personal Email: _____

Shirt Size: _____

CPR and/or First Aid certified? _____ Expires: _____
(Please provide a photocopy of your card with this application.)

If yes, Card level/Title: _____

Please list any children you have playing in NFL Milton Steelers:

Child's name: _____ Program: _____
 Child's name: _____ Program: _____
 Child's name: _____ Program: _____

Position Volunteering for (please check one):

Head Coach _____ Assistant Coach _____

Program (please check one):

Flag Football 1st _____ 2nd _____ 3rd _____ 4th _____ 5th _____ 6th _____ 7th _____
 Tackle Football 2nd _____ 3rd _____ 4th _____ 5th _____ 6th _____ 7th _____

EMPLOYMENT INFORMATION

Employer: _____

Work Phone: _____

Address: _____

City: _____

State: _____

Zip: _____

Occupation/Position: _____ Years employed: _____



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QUALIFICATIONS

Football Coaches: Do you have any flag football coaching experience? Yes No (Years) _____

Football coaches: Do you have tackle football coaching experience? Yes No (Years) _____

Please list the three most recent tackle football coaching positions you have held:

From: _____ To: _____ Age Group: _____ Organization/Location: _____

Position: Head Coach Assistant Coach Other (please explain)

Additional info (optional):

From: _____ To: _____ Age Group: _____ Organization/Location: _____

Position: Head Coach Assistant Coach Other (please explain)

Additional info (optional):

From: _____ To: _____ Age Group: _____ Organization/Location: _____

Position: Head Coach Assistant Coach Other (please explain)

Additional info (optional):

Have you played football (football coaches only)? Yes No

If yes, please list experience:

Have you officiated football (football coaches only)? Yes No

If yes, please list experience:

Are you willing to get USA Tackle Certified _____

Are you willing to get USA Flag Certified _____

Are you willing to get a background check with City of Milton Police Department _____

As a coach of Tackle Football there will be coaching meetings are you willing to deadiate the time to collaborate with your fellow coaches in order to make our players successful? Yes or No Please explain:



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Please list any experience you may have coaching other sports:

Why do you want to be a volunteer coach for NFL Youth Football League?

PERSONAL REFERENCES

Please provide at least three personal references who are not relatives:

Contact Name: _____

Phone: _____

Affiliation: _____

Contact Name: _____

Phone: _____

Affiliation: _____

Contact Name: _____

Phone: _____

Affiliation: _____

Please feel free to include with this application letters of recommendation from any references.



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BACKGROUND CHECK

Have you ever been refused participation in any youth sports organization? Yes No

If yes, please explain: _____

As a condition of volunteering, I give permission for NFL Milton Steelers to conduct a background check on me, which may include a review of sex offender registries, child abuse and criminal history records. I understand that, if appointed, my position is conditional upon NFL Milton Steelers receiving no information of inappropriateness in my background. I hereby release and agree to hold harmless from liability the Milton Steelers officers, volunteers, and any other person or organization that may provide such information. I also understand that, regardless of previous appointments, NFL Milton Steelers is not obligated to appoint me to a volunteer position. If appointed, I understand that, prior to the expiration of my term, if I violate any NFL Milton Steelers policies or principles as outlined in the Bylaws, or undertake any activity that is deemed by the Board not to be in the best interest of our student athletes or the organization programs, I will be subject to suspension and removal by the NFL Milton Steelers Board.

Signature: _____

Date: _____

Full Legal Name: _____

Date of Birth: _____

Place of Birth: _____

Social Security Number: _____

Please attach a photocopy of your driver's license to this application.

Please return your completed application and all attachments to: