



FORT COLLINS BASEBALL CLUB
COACHES APPLICATION - LEVELS 1, 2 & 4
 P.O. Box 1031 * Fort Collins, Co. 80522
 970-484-3368 or Fax 970-484-6231
www.fortcollinsbaseballclub.org or Director@fcbcmail.org



Instructions: Each question should be fully and accurately answered. Please print or type

FULL Name: _____ H Phone: _____
 (Must have full legal name & Middle)
 Mailing Address: _____ W Phone: _____
 City/State/Zip: _____ Cell Phone: _____
 Email (required): _____

Do you possess a valid driver's license? Yes [] No []

Back ground Check required on all applications: Social Security # _____

Are you age 18 or older? [] Yes [] No List date of birth (required) _____

Have you lived in Colorado for less than three years? [] Yes [] No
 (If yes, please give last place of residence) _____

Are you a citizen of the United States or do you have a valid work permit? [] Yes [] No

- Have you ever been convicted of a **felony criminal** offense? [] Yes [] No
- Have you ever been convicted of a **misdemeanor offense**? [] Yes [] No

If your answer is "yes" to either of the above questions, please explain the date, location, nature, and facts surrounding each conviction.

Leagues: Current 2010 - 2011 Grade: Choose the league for the grade your child is currently IN.

Level 1 [] Pre-Kindergarten [] Kindergarten [] 1st Grade [] 2nd Grade
 (T-Ball) (Adv T-Ball/Soft-toss) (Coach Pitch) (Player/Coach Pitch)
Level 2 [] 3rd Grade (Modified Ball) [] 4th Grade (Modified Ball) [] 5th / 6th Grade (Modified Ball)
Level 4 [] 7th /8th Grade (High School Rules) [] 9th – 11th Grade (High School Rules)

School Preference: _____

All Coaches for grade 5th ages 11 and UP MUST complete the State MANDATED ONLINE Concussion TEST to Coach with FCBC. Go to <http://www.cdc.gov/concussion/HeadsUp/youth.html> and take the test. Coaches need to provide copy of certification to FCBC with application.

Did you coach with FCBC in 2011? If so what team and were you the head coach. Team Name, League and age coached.

Reference from last coaching position: _____

Phone: _____ Relationship to Coach _____

Have you ever played the game of baseball? [] Yes [] No (if yes, to what level):

NOTE: If you were registered with FCBC in 2010 as the **head coach please skip** the questions below and read and sign the Certification.

What other coaching/teaching experiences do you have that would be relevant to this coaching position.

As a Volunteer Coach with FCBC Coaching Clinic's and meetings are required to be a head coach. Are you willing to attend coaches clinic's in May? [] Yes [] No, If no please explain.

Can you please provide a basic practice outline for one day, for players in the grade that you are requesting to coach.

Application Certification

I certify that all statements made in this application are true and complete and authorize Fort Collins Baseball Club to investigate all statements made as a part of this application and to secure any necessary information for references and law enforcement agencies.

I hereby release all of those persons, references, agencies and Fort Collins Baseball Club for any liability arising from their giving or receiving information about my employment, qualifications or criminal record.

I understand that any false answers or statements or misrepresentations by omission made by me as part of my application, will be sufficient for rejection of my application or my immediate suspension or discharge should one be discovered after I am coaching a team. FCBC reserves the right to do background checks.

I hereby acknowledge that I have read and understand the preceding statement.

Signature / Date _____