



Salinas Colts & Broncos Assistant Coach Application

Applicant Information

Name

Date

Address

Date of Birth

Email

Cell Phone

Home Phone

Teams of Interest

Check all that apply:

- Mighty Broncos (flag team, ages 4-6)
- Jr. Broncos (tackle team, ages 7-9)
- Broncos (tackle team, ages 9-12)
- Colts (tackle team, ages 11-14 / 8th grade)

Areas of Coaching Interest

Check all that apply:

- | | |
|--|--------------------------------------|
| <input type="checkbox"/> Assistant Coach | <input type="checkbox"/> Offense |
| <input type="checkbox"/> Defense | <input type="checkbox"/> Line |
| <input type="checkbox"/> Special Teams | <input type="checkbox"/> 5th Quarter |

Other (please specify):

Have you coached before? If so, please list your experience and with what teams/levels.



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Acknowledgements

I can pass the MBYFL background check with a green light determination:

Yes No

I am currently CPR and/or First Aid certified (not required):

Yes No

I have read and agree to abide by the MBYFL Coaches Code of Conduct:

Yes No

I have been disciplined, formally warned, or suspended for violations of the MBYFL Code of Conduct while with SCB or any other team:

Yes No

Signature

Date

IT IS OUR GOAL TO TRY TO UTILIZE EACH ELIGIBLE APPLICANT. HOWEVER, THE HEAD COACH OF EACH TEAM RESERVES THE RIGHT TO CHOOSE HIS/HER OWN COACHING STAFF. YOUR APPLICATION WILL BE GIVEN TO THE HEAD COACH FOR HIS/HER CONSIDERATION.