

New Creation Christian Academy Coaching Application

This is an application and request to apply for the Athletic Director position at New Creation Christian Academy (NCCA). No individual is eligible to teach without an approved application on file. The NCCA Administration and the NCCA School Board will not consider any application that is incomplete. The outcome of your application will be based on the information on this form, your past actions and attitude (on and off the field), and any other information gathered by NCCA. The information you provide will be kept confidential and used exclusively by NCCA. NCCA expresses its gratitude and appreciation for your time and willingness to apply for a challenging but rewarding position. NCCA will notify you of the outcome of your application as soon as possible.

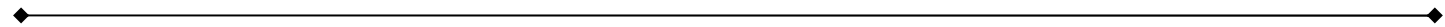
Legal Name: (First) _____ (Middle) _____ (Last) _____

Street Address: _____ City/State/Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

E-mail Address: _____

Church Affiliation: _____ How long? _____



Personal References: Do not list family members or relatives for references. You must sign the Release Form as part of this application.

Give two references that are qualified to speak of your Christian values.

<u>Name</u>	<u>Address</u>	<u>Contact Phone</u>

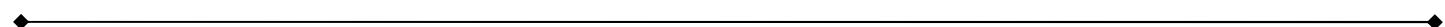
Give two references that are qualified to speak of your athletic ability and experience.

<u>Name</u>	<u>Address</u>	<u>Contact Phone</u>

List your current and previous employer.

Employer		Position	
Supervisor's Name		Phone	

Employer		Position	
Supervisor's Name		Phone	



Position Desired: Please list the position for which you are applying. _____

Special Abilities: please list any special abilities you have which could contribute to your ability to execute the job for which you are applying: _____



Coaching Background

Coaching Certificate Number: _____ Expiration Date: _____

Name of Certification Affiliation: _____

What sports would you like to coach in order of preference? _____

What coaching experience do you have? (Specify the sports you have coached, the number of years you have coached and the age range of the athletes you have coached.)

What training have you received for coaching (e.g. seminars or certificates held)?

What is your primary motivation to coach a team with NCCA?

Have you ever been subjected to disciplinary action of any kind (including, but not limited to fines, forfeitures, suspensions, reprimands or denial of participation) while participating in other sports organizations?

_____ No _____ Yes If yes, please give details:

Have you ever been convicted of a crime related to or involving: a child, a sexual offense, assault or a drug related offense? _____ No _____ Yes If yes, please give details:

Please be sure to attach your statement of faith.

**CRIMES THAT RESTRICT EMPLOYMENT AND/OR SERVICE
WITH CHILDREN AND YOUTH AT
NEW CREATION CHRISTIAN ACADEMY**

Individuals who have been convicted of a crime listed below, or any other offense committed outside the State of Georgia that would have been considered on of these crimes if committed in Georgia, are **disqualified** from employment and/or service with children and youth as indicated below.

1. NCCA will **not** consider applicants who have been convicted of child abuse, neglect or mistreatment, regardless of the date, unless expectations are approved by Administration.
2. There is a mandatory disqualification from employment and/or service with children and youth for a minimum of five (5) years from the date of conviction, plea of *nolo contendere*, or release from incarceration or probation, whichever is later, for the following crimes:
 - Family Violence (O.C.G.A. 19-13-1)
 - Serious/Violent Felonies
 - Cruelty to Children
 - Sexual Offenses
 - Theft by Taking (O.C.G.A. 16-8-2), by Deception (O.C.G.A. 16-8-3), or by Conversion (O.C.G.A. 16-8-4)
3. Applicants may also be disqualified from serving in positions which involve the supervision of children or youth, as determined appropriate by Administration, if criminal history records indicate any of the following that have relevancy to the responsibilities or duties of the position.
 - 3.1 any other conviction or pattern conviction
 - 3.2 a pattern of recent arrests
 - 3.3 a significant arrest (disqualification to apply until such time as the charge is resolved)

Authorization to Release Information

I agree that I will appear for interviews before the NCCA Administration. I agree to comply fully with the letter and intent of all rules, regulations and rulings adopted by NCCA. I understand that any action by me, or those under my supervision, either physical or verbal, that is deemed to be detrimental to students, parents, others in the community, or to NCCA as an organization, may result in disciplinary action.

I understand that the key to a successful athletics program is the staff. I commit to demonstrating Christian values as a role model for the students under my supervision.

I understand that the information I have given here is subject to investigation and verification for the purpose of evaluating me for the consideration of effectively leading the Athletic Department at NCCA. By signing this document, I authorize NCCA to perform a background check and to thoroughly investigate references, work records, evaluations, education and any other matters related to my suitability for employment by a company they deem fit. I certify that all information I have given in this application is true and correct and that falsification of this application may constitute denial or suspension.

I authorize references and my employers for the past five years to disclose to NCCA and all employment records, performance reviews, letters, reports and other information related to my life and employment, without giving me prior notice of such disclosure.

In addition, I hereby release NCCA, my employers, references and all other parties from any and all claims, demands or liabilities arising out of or in any relation to such investigation or disclosure.

I waive the right to ever personally view any references given to NCCA.

I certify that I have carefully read and do understand the above statements.

Applicant's Name: _____

Applicant's Signature: _____

Applicant's Social Security #: _____ D.O.B. _____

Today's Date: _____

