

SAUGUS PUBLIC SCHOOLS

23 Main Street
Saugus, MA 01906

Richard P. Langlois
Superintendent of Schools

Athletic Application of

Miss, Mrs., Ms., Mr. _____

(Last Name) (First Name) (Middle Initial)

Address: _____ Social Security No _____

Street

Telephone Number _____

City/Town State Zip

Coaching Position for which you are applying: _____

Personal Data

Educational Preparation and Training					
School	Name	Location	Specialization	Graduated	Degree/Diploma
High School					
Jr. College					
College					

Scholastic/Athletic Accomplishments

Please Submit the Following Information with the Application

The applicant is responsible for submitting a letter of intent, resume, three letters of reference (at least two of which speak to the candidate's coaching competence and potential for the position), health certificate, and CORI form.

Checklist

___ Letters of Reference (3)

___ Resume

___ CORI Form

___ Health Certificate

___ Appointment Date

___ Salary _____