GREECE CENTRAL SCHOOL DISTRICT
Interscholastic Athletic Program
COACHING INFORMATION SHEET

[ ] New Applicant **[ ] Current Greece Employee**

Name: _____

Last First Middle Initial

Phone # _____ **SS#** (Used to verify courses in TEACH) _____

Coaching Interest:

Sport(s): _____ _____ _____ _____

Position: (Please check areas of interest)

Position:	_____ Head Coach	_____ Assistant Coach		
Level:	_____ Middle School	_____ High School		
Type:	_____ Men	_____ Women		
Season	_____ Fall	_____ Winter	_____ Spring	
School	_____ Arcadia	_____ Athena	_____ Odyssey	_____ Olympia

NYS Coaching Requirements: Check all that are completed *(photocopies of certificates or college transcripts required)*

_____ First Aid Course

_____ CPR/AED Course

_____ Child Abuse Identification Course

_____ SAVE (School Violence Intervention and Prevention) Course

_____ DASA (Dignity for All Students Act) Course

NFHS Coach Certification Program: Check all that are completed *(photocopies of certificates or college transcripts required)*

_____ NFHS Level 1 _____ NFHS Level 2 _____NFHS Level 3

Coaching Experience:

Sports Participation:

Unpaid Coaching Experience:

Paid Coaching Experience: (working with K-12 students in a school district other than Greece Central School District) ***MUST INCLUDE ACTUAL DATES***

By affixing my signature, I affirm that all information set forth in this application is accurate, truthful and complete. Furthermore, I am aware that any material and deliberate falsification of fact(s) on the above material is grounds for denial of employment or dismissal from employment.

Signature: _____ Date: _____

Revised 10/28/2026