

Kashunamiut School District
985 KSD Way
Chevak, AK 99563

Coach Application

Personal Information

Name: _____
FIRST MIL LAST

Email: _____

Social Security Number:	
Date of Birth:	

Mailing Address

Box/Street #: _____

Address 2: _____

CITY STATE ZIP CODE

Phone:		Alt. Phone:	
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Positions applying for: (please list)

EDUCATION AND EXPERIENCE

(Upon hire, official transcripts will be required.)

Do you have a high school diploma or GED? Yes No

High School Attended: Name: _____

Location: _____

Previous coaching experience			
Sport/Activity	School or location	Dates	Other information
		From: To:	
		From: To:	
		From: To:	

		From: To:	
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Have you ever been convicted of a crime?

Yes

No

If "yes" please explain.

Thank you for your interest in supporting the students of Chevak School.