CFS Sports Leadership Interest Form Head Coach

Name: Address:	Telephone: E-mail:
What activity do you wish to be head coach for:	
Are you a CFS member? If not, have you signed the CFS Statement of Faith?	□□ Yes □□ No □□ Yes □□ No
Please list the name of the church you attend	
For the questions below, be as complete as possible. Attached a separate typed page with your answers if you'd prefer. Describe Related Qualifications, Experience, Background, etc.:	
Express your vision or goals in leading this activity for	the year:
What do you foresee that might cause hardship in lea	ding the activity?
Is there anyone you would like to request as an assis	tant leader?
Please list the names & contact information for two personal should be a church leader:	eople who might give a reference-one of these
I have read the CFS Athletic Policies and agree to colcoach or leader.	mply and uphold those policies if selected as a
Date:	ignature:

Return to: Drew Culberth, Athletic Director, ad@cfsks.org