

Texas HeatWave Soccer Club Application to Coach

Please answer the following questions as completely as possible to help the association make the best selection of its coaching staff. All teams are formed per our association rules and guidelines.

Name: _____ Phone (H): (____) _____

Address: _____ Alt Phone: (____) _____

City: _____ Zip: _____ Email: _____

Player's Name: _____ Relationship to Player: _____

I would like to be considered as a candidate to coach ___ Boys ___ Girls Age Group ____

PART I – Coaching & Officiating Experience

Are you a USSF Registered Referee? ___Yes ___No If so, what grade? _____

Please describe your coaching experience. (Not required to coach)

Team	Competition Level	Year	Age Group	Gender	Summary of Season

Describe your highest level of coaches training. Please include the year, type of clinic or license regarding coaching, player training, etc.

PART II – Personal Experience

Please describe any previous soccer playing experience: _____

Please describe other participation you have had within youth sports: _____

PART III - Questionnaire

What do you feel are your strongest qualities as a coach, both on and off the field? _____

How do you handle conflicts on your team (player, parents, schedules, etc...)? _____

If you are selected to coach, will you adhere to the governing policies & guidelines of Texas HeatWave Soccer Club and STYSA? ___ Yes ___ No

A coach is responsible for the conduct of his/her team, including players, parents and all sideline behavior. If selected to coach, will you be conscientious about overseeing the team's conduct and adherence to the rules? Yes No

Teams are expected to participate in all Texas HeatWave Soccer Club activities including committees and club sponsored events including tournament and playoff hosting. If approved, will you help obtain volunteers from your team to assist with these functions? Yes No

Teams are expected to provide two certified referees per team. (U7 and older) U4-U6 is strongly encouraged to supply one referee. Will you encourage certification amongst your team parents and youth (when mature enough)? Yes No

If not selected as Head Coach, then are you willing to be an Assistant Coach?

Yes No

- I understand that coaching a youth team requires a large time commitment and feel that my family, job, etc... will allow me sufficient time to dedicate to the team.
- I understand that submission of this application alone does not guarantee me a team.
- I am at least 18 years old or older and I agree to Risk Management Screening per SYSTA KIDsafe procedures.
- I understand that all Head Coaches are strongly encouraged to have a coaching license and all Assistant Coaches are encouraged to obtain a coaching license prior to the start of the season. I further understand that in the near future ALL coaches will be asked to have a coaching license.

Signature: _____ Date: _____

Return Application to: Texas HeatWave Soccer Club 5332 FM 1960 E, Suite C Humble, TX 77346. You can also fax this application to the office at 281-359-7293.

Date Received: _____ Final Decision: Approved Not Approved

Gender: Team Age: _____ Division: _____ Team Name: _____

KIDSafe Confirmation Number: _____

<https://www.backgroundchecks.com/pages/stysaApplication.asp>