



# Bozeman Bucks and Spikes Amercian Legion Baseball Coaching Application



**Contact Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: Evening \_\_\_\_\_ Day \_\_\_\_\_

Are you 18 years or older? Yes \_\_\_ No \_\_\_

Do you have a valid driver's license? Yes \_\_\_ No \_\_\_

Resume attached Yes \_\_\_ No \_\_\_

1. Circle the highest year you completed in school:  
 Elementary 1, 2, 3, 4, 5, 6, 7, 8    High school 1, 2, 3, 4    College 1, 2, 3, 4, 5, 6, 7, 8

2. Work history for last 10 years. (List Company Position & Dates)

Company	Position	Dates
1.		
2.		
3.		
4.		
5.		

3. What Team do you wish to coach?      Bucks \_\_\_\_\_      Spikes \_\_\_\_\_

4. Why do you want to coach this Team? (Be specific):


5. Have you played baseball? Yes \_\_\_ No \_\_\_ # of Years: \_\_\_\_\_

Baseball Program	Positions	Years
1.		
2.		
3.		
4.		
5.		
6.		

6. What other sports have you played?

<b>Sport</b>	<b>Age Level</b>	<b>Years Played</b>
1.		
2.		
3.		
4.		
5.		

7. Have you previous coaching experience? Yes \_\_\_\_\_ No \_\_\_\_\_ # of years \_\_\_\_\_

8. What is your Coaching Background:


9. What other sports have you coached?

<b>Sport</b>	<b>Organization</b>	<b>Age Level</b>	<b>Years Coached</b>
1.			
2.			
3.			
4.			
5.			

10. Have you had any formal training as a coach? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please describe. (for example PE degree, coaching courses, clinics, etc.):


11. Describe any informal training that would help you coach (for example, clinics attended, reading books, watching sports, etc.).


12. Have you ever been convicted of a felony or crime? If so, please explain:


13. Do you have any medical conditions that may affect your ability to coach? Yes.\_\_\_\_ No \_\_\_\_\_

14. Please rate your knowledge of the following topics with regard to baseball by circling the appropriate number. 1 = You know very little about it  
 2 = You have reasonably good knowledge about it  
 3 = You know a great deal about it

1 2 3	Skill and strategies of the sport
1 2 3	Rules of the sport
1 2 3	Organizing practices
1 2 3	Equipment needs and specifications
1 2 3	Injury prevention and treatment
1 2 3	Risk Management
1 2 3	Developing sportsmanship 1 2 3 Communication skills
1 2 3	Warm-up and physical conditioning techniques 1 2 3 Working with parents
1 2 3	Principles for teaching sport skills 1 2 3 Managing time

15. Please list the name, address, and telephone number (if available) of two persons who can attest to your coaching potential. One should be your most recent supervisor or coach:

Name	Address	Telephone
1.		
2.		

16. Please list name, address, and telephone number of Coaching References:

Name	Address	Telephone
1.		
2.		

Please send your completed application to:

**Bozeman Baseball**  
**PO Box 6054**  
**Bozeman, MT 59771**

Or by email to: [heroespark@yahoo.com](mailto:heroespark@yahoo.com)

