Sioux Falls Christian Schools 6120 S. Charger Ave. Sioux Falls, SD 57108

Application for Coaches

	Date			
Name	Home Phone	Home Phone		
Address	Work Phone			
City	Cell Phone			
Zip				
Coaching Position You Desire:				
Cross Country	Golf (G	Golf (Girls) (Boys)		
Volleyball	Football	Football		
Soccer	Cheer	Cheer		
Basketball (Girls)	Track	Track		
Basketball (Boys)	Dance	Dance		
Tennis (Boys)				
Education: College Major	Minor			
Colleges Attended:	Degree	Dates		
	Degree	Dates		
	Degree	Dates		
Coaching Experience: School/Organization Address	Dates	Level		
Where are you presently working?				

Spiritual Data:

Church Affiliation	_ Are you a member?	How long?
Church Participation		
Do you agree with the attached Statement of Faith?		
List any exceptions or reservations you may have concernin	g this statement.	
Give a brief statement of your Christian faith.		
Miscellaneous Data:	distinctive?	
What in your opinion makes coaching in a Christian school		
What constitutes your basic philosophy of coaching?		

What do you believe are the most important things an athlete can gain through participation in sports?
What is your philosophy toward the following? • Discipline
Parent/Coach Relationships
Describe your strengths as a coach.
Describe any weaknesses you see in your coaching or coaching style.
Briefly state why you wish to coach at Sioux Falls Christian

References: Name	Address	Phone	Relationship	
(Signatur	e of Applicant)		(Date)	
FAX - 605.334.6928		Email: jbg@sioux	Email: jbg@siouxfallschristian.org	

Sioux Falls Christian Schools Statement of Faith

Please read the attached document regarding our statement of faith. Please respond in a short paragraph your ability to work within that summary of beliefs.