

# Portland Tackle Football Association Inc.

P.O. Box 288, Portland, MI 48875 [www.portlandjrraiders.com](http://www.portlandjrraiders.com)

## COACH APPLICATION(revised 4/27/22)

Name: \_\_\_\_\_  
Last First middle

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

Telephone: Home(\_\_\_\_) \_\_\_\_\_ Work(\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_) \_\_\_\_\_ Shirt Size \_\_\_\_\_

1. Grade Level applying for this upcoming season: 4<sup>th</sup> 5<sup>th</sup> 6<sup>th</sup> 7<sup>th</sup> 8<sup>th</sup>

A. Coaching Position: Head Assistant Practice volunteer

2. Do you have a child participating in PTFA? NO YES \_\_\_\_\_  
(Circle One) (If yes, list child's name)

3. List other coaches you desire to coach with this upcoming season: \_\_\_\_\_  
\_\_\_\_\_

4. Have you coached football or cheerleading previously? NO YES \_\_\_\_\_  
(Circle One)

If yes, list program including dates: \_\_\_\_\_  
\_\_\_\_\_

5. Please list other coaching experiences: \_\_\_\_\_  
\_\_\_\_\_

6. Describe your coaching philosophy: \_\_\_\_\_  
\_\_\_\_\_

7. Please list any coaching clinics / seminars attended including dates: \_\_\_\_\_  
\_\_\_\_\_

All coaches are required to attend a PTFA Board Meeting, a coaches training facilitated by Mid-Michigan Pony Football League, Inc. and have a criminal history check through the Michigan State Police and meet the minimum criteria set by the Michigan Public School as mandated by the Mid-Michigan Pony Football League prior to coaching and/or the beginning of the season. After two consecutive years of coaching PTFA, coach interviews may be waived at the PTFA Board's discretion. Negative coaching is not acceptable behavior for practice or games.

All attempts will be made to allow coaches to follow their team upon successful completion of the interview process. If a coach volunteers for a particular team, the PTFA Board will try to place them where they wish, but may have to put the coach where the position is needed.

-----Required information for criminal history check-----

NAME: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Other Names Used: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ 19 \_\_\_\_

Driver's License No: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_

I, \_\_\_\_\_ agree to allow PTFA Board process a criminal history check on myself  
(Print your name)

Using the above information I have provided \_\_\_\_\_  
(Your signature) (Date)

Return application to: Portland Tackle Football Assoc, Inc P.O. Box 288, Portland 48875