



St. Matthew School

1307 Lincolnshire Dr.
Champaign, IL 61821
217-359-4114

Coaching Application – Renewal ONLY

(‘Renewal ONLY’ form is acceptable for coaches from the prior school year)

Date: _____

Name of Sport: _____ Grade Level: _____ Boys _____ Girls _____

Position Desired(*check one*): Head Coach _____ Assistant Coach _____ Either One _____

Name: _____ E-Mail: _____

Address: _____ City: _____

Phone Numbers: Home _____ Work _____ Cell _____

List any new or additional information that may be helpful in considerations concerning renewal of current coaching position:

I understand as a coach at St. Matthew School, I agree to the following:

- 1) Submission of fingerprints to be used for a criminal background check.
- 2) Submission of a C.A.N.T.S. form to be used for a D.C.F.S. background check.
- 3) Attendance at a “Protecting God’s Children” Workshop
- 4) To fill out all of the St. Matthew School required/requested paperwork.
- 5) To read and abide by the St. Matthew School & Athletic Policies.

Signature: _____ Date: _____

(Required for consideration as a St. Matthew School Coach)