

**ST. BARNABAS ATHLETIC PROGRAM**

**Coaching Candidate Questionnaire**

Date: \_\_\_\_\_

Name: \_\_\_\_\_ Phone #'s: \_\_\_\_\_

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

Sport: \_\_\_\_\_ Grade Level: 4th \_\_\_ 5th /6th \_\_\_ 7th /8th \_\_\_ High School \_\_\_

Head Coach \_\_\_ Asst Coach \_\_\_ Level: A \_\_\_ B \_\_\_ C \_\_\_

Parish Member: Y \_\_\_ N \_\_\_ Since: \_\_\_\_\_ Age: (only if 25 or under) \_\_\_\_\_

Names and Current Grade Level of Children: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Your Experience Playing and/or Coaching:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Names and Phone Numbers of Coaching References:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Coaching in the CYO Program at St. Barnabas Parish will require the following:**

- 1) Background Check
- 2) Archdiocesan VIRTUS training
- 3) CYO Certification
- 4) Parish Membership In Good Standing
- 5) Review and Compliance with St. Barnabas Athletic Committee By-Laws