

Maple River Coop

Coaching Application

Applicant Information									
Full Name:					Date:				
	Last	First	ţ.		M.I.				
Address:									
Street Address						Apartme	nt/Unit #		
	City				State	ZIP Code			
Phone:				Email					
Date Available:		Social Securit	ty No.:		Desired	Salary: \$			
Coaching Pos Applying for:									
Are you a citizen of the United States?		YES	NO	If no, are you aut	horized to wor	k in the U.S.?	YES	NO	
Have you eve	er worked for us?	YES	NO						
Do you have a valid driver's license?		YES	NO						
List Drivers' l	icense Type:								
	to perform the essential fur out reasonable accommodat		ob you are NO	applying for,					
Coaching E	xperience								
School Name	::		Address:						
From:	To:	Contact:							
School Name	::		Address:						
From:	To:	Contact:_							
			Refer	ences					
Please list th	ree professional reference	S.							
Full Name:				Relationship:					
Company:						one:			
Address:									

Full Name:	Relationship:				
Company:	Phone:				
Address:					
Full Name:	Relationship:				
Company:					
Address:					
	Current Employment				
Company:	Phone:				
Address:					
Job Title:					
Any scheduling conflicts that may arise:					
	BATTLE CO. L.				
	Military Service				
Branch:	From:	To:			
Rank at Discharge:	Type of Discharge:	Type of Discharge:			
If other than honorable, explain:					
	Disclaimer and Signature				
I certify that my answers are true and comp	olete to the best of my knowledge.				
If this application leads to employment, I un result in my release.	nderstand that false or misleading information in my appli	cation or interview may			
I agree to follow all rules and procedures se Co-op policies.	et forth by the North Dakota High School Activities Associa	tion, and Maple River			
Signature:	Date:				

EE/AA STATEMENT:

The Maple River Co-op is committed to maintaining a learning and working environment free from discrimination and harassment in all employment and educational programs, activities, and facilities. The Co-op prohibits discrimination and harassment based on an individual's race, color, religion, sex, gender identity, national origin, ancestry, disability, age, or other status protected by law. External applicants are eligible for ND Veteran's Preference: North Dakota veterans claiming preference must submit all proof of eligibility by the closing date. Proof of eligibility includes form DD214, and if claiming disabled veteran's status, a current letter of disability. Questions/concerns can be directed to Alli Roller, Business Manager at 701.668.2520/701.945.2473.