



Coaching Application

Revised 05/10/2023

APPLICANT INFORMATION

Name:

Address:

City/State/Zip:

Email:

Phone:

2nd Phone:

AGE GROUP/TEAM INFORMATION

Age bracket applying for:

Gender:

Boys

Girls

Team name applying for:

Applying as: Head Coach Assistant Coach (Name of head coach: _____)

LICENSING & EXPERIENCE

Coaching Licenses (provide documentation if not already on file with KSC):

Coaching Experience (please list any level of coaching and sports you have coached):

Workshops or clinics (general description, location and date of workshops or clinics):

Playing experience:

List any experience or training in working with youth:

PO Box 904

Kearney, NE 68848

www.kearneysoccer.org

(308) 293-1736



List 3 references (name, address, phone and years known):

Applicant Signature

Date

Disclaimer: Kearney Soccer Club requires all Competitive and Select coaches involved in coaching youth to follow Nebraska State Soccer requirements regarding Background checks and safety certifications. Coaches may not participate with respective teams until those requirements are applied for. After August 1, coaches may not participate with respective teams until those requirements have been approved by the state.

Applications for all Head and Assistant Coaches must be returned to:

Mike Munch c/o
Kearney Soccer Club
811 W 11th St
Kearney NE 68845

Questions or more information:

Mike Munch
308-708-1260
mikemunch@outlook.com