

Naugatuck Youth Soccer

Coaching Letter of Intent

I am interested in coaching a team in the Naugatuck Youth Soccer League for the upcoming season. Please indicate which league;

Boys U-9 U-10 U-11 U-12 U-13 U-14 District Rec.

Girls U-9 U-10 U-11 U-12 U-13 U-14 District Rec.

Specific Team & Reason _____ (if applicable)

Name: _____ Phone: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____ email: _____

Soccer Coaching Background: Coaching License: Y"" or N" If Yes License # _____

League Name(s): _____ Years: _____ Age level: _____

Other Coaching Experience:

Sport: _____ League Name: _____

Years: _____ Contact: Phone: _____

Additional Information: (required)

Please explain your interest in coaching:

Provide your expectations of the players and parents:

Explain your coaching philosophy:

Your letter will be reviewed by the board of directors and you will be contacted by the League VP for any follow up questions. All applicants will be required to complete a background check prior to being selected to coach a team. Please go to <http://www.cjsareg.org/choicepoint.html>

Signature: _____ Date: _____

Email completed/signed form to the NYS League VP and Travel Director