Our players are our most valuable asset. It is important for the growth and development of our players that a qualified candidate is elected to become Head Coach to ensure that the players are put in the best possible situations to become successful. Thanks very much for your interest in becoming a Head Coach. When completing this application, please be as candid as possible. There are no right or wrong answers. This application will be made available to the PYSA Board so that a vote can be taken as to who will be coaching, teaching and spending time with our kids. Please use additional space if necessary.

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Home Phone #: |  |
| Address: |  |
| Town: |  | State: |  | Zip: |  |

|  |
| --- |
| **Coaching Experience**Please indicate your soccer coaching experience. Include years coached, level of play (e.g. high school, collegiate, professional, semi-pro, amateur, etc.) and any other related information. |
| **Recreational / Development** | **Competitive / Travel** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |
| --- |
| **Playing Experience**Please indicate whether you have any soccer playing experience and include years played, level of play (high school, collegiate, professional, semi-pro, amateur, etc), other related info, etc… |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
| USSF licenses, NCSAA diplomas or SRI certificates held? |  |

|  |  |
| --- | --- |
| Planned USSF licenses, NCSAA diplomas or SRI certificates: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Coaching Position: | € Head Coach | € Assistant Coach |  |
| Age Level (e.g. U10 Boys) : |  |  |  |
| Desired Team: |  |  |

|  |  |  |
| --- | --- | --- |
| Willing to be an active assistant coach if you are not elected as a Head Coach? | € Yes | € No |
| What seasons would your team be active? |
| € Fall | € Winter/Indoor 1 | € Winter/Indoor 2 | € Spring |

|  |
| --- |
| What seasons would be required for your players? |
| € Fall | € Winter/Indoor 1 | € Winter/Indoor 2 | € Spring |

|  |  |  |  |
| --- | --- | --- | --- |
| How many Fall Tournaments? |  | How many Spring Tournaments? |  |
| What weekends for Tournaments? |  |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| How many practices per week? | Fall |  | Winter |  | Spring |  |

|  |  |  |
| --- | --- | --- |
| For **U8/U10** Coaches: U.S. Soccer development philosophy states that all players should play a minimum of 50% of the time in each game. Will you play the players on your team in accordance with the U.S. Soccer standards? | € Yes | € No |
| If not, please explain how you will allocate playing time? |
|  |
|  |
|  |
|  |

|  |  |  |
| --- | --- | --- |
| For **U11/U12** Coaches: U.S. Soccer development philosophy states that all players should play a minimum of 50% of the time in each game. Will you play the players on your team in accordance with the U.S. Soccer standards? | € Yes | € No |
| If not, please explain how you will allocate playing time? |
|  |
|  |
|  |
|  |

|  |
| --- |
| For **U13 & older** Coaches: How you will allocate playing time? |
|  |
|  |
|  |
|  |

|  |
| --- |
| Additional pertinent information regarding why you desire to be a Head or Assistant Coach for the Portsmouth Pirates Soccer Club: |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| Please provide the names of 3 references that we may contact: |
| Name: |  | Phone #: |  |
| Name: |  | Phone #: |  |
| Name: |  | Phone #: |  |

I have read and understand pertinent information about being a Head Coach or Assistant Coach for the Portsmouth Pirates Soccer Club. I agree to sign a Portsmouth Pirates Soccer Club Coaches Code of Conduct. I understand that Portsmouth Pirates Soccer Club and Soccer Rhode Island have adopted a zero tolerance policy for interaction with referees and I will conduct myself accordingly. I agree to allow Soccer Rhode Island to perform a Risk Management background check. I will inform the Portsmouth Pirates Soccer Club of any arrests which occurred either previously, currently or while I am involved with the Portsmouth Pirates Soccer Club. I will inform the Portsmouth Pirates Soccer Club of any involvement with a premiere soccer club which occurred while I am coaching for the Portsmouth Pirates Soccer Club.

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

# *Preferred submission:* Send email to piratespres@pysa.com with application attached. See website or club-wide mass emails for due date and other info. Note that e-mail submission implies application has been signed.