

SUPPLEMENTAL APPLICATION DIRECTIONS APPENDIX B

Once you have completed the application below:

1. You can email the file, as an attachment, to the appropriate person (listed on the application), **OR**
2. You can print the file and address it to the appropriate person (listed on the application).

If emailing the application to the appropriate person (listed on application), please ask for confirmation to make sure it has been received. You will be responsible for your own application and making sure it gets received. If you have any questions, please call Crystal Woodard at 887-5543 ext. 401 or email at cwoodard@smethportschools.com.



SMETHPORT AREA SCHOOL DISTRICT SUPPLEMENTAL APPLICATION FORM



Name:

Email:

Address:

Cell phone:

City:

State:

Zip:

Home phone:

For directions on how to make your choice(s) in these sections click [here](#).

Position applying for: Boys Girls **Sport:**

- | | | |
|---|--|--|
| <input type="checkbox"/> Head Coach | <input type="checkbox"/> Baseball | <input type="checkbox"/> Soccer |
| <input type="checkbox"/> Assistant Coach | <input type="checkbox"/> Basketball | <input type="checkbox"/> Softball |
| <input type="checkbox"/> Volunteer | <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Track & Field |
| <input type="checkbox"/> Varsity / <input type="checkbox"/> JVs | <input type="checkbox"/> Cross Country | <input type="checkbox"/> Volleyball |
| <input type="checkbox"/> Jr. High | <input type="checkbox"/> Football | <input type="checkbox"/> Wrestling |
| <input type="checkbox"/> Elementary | <input type="checkbox"/> Golf | <input type="checkbox"/> Other (list): |

District Supplemental applying for: (submit directly to Principal)

- | | | |
|--|--|--|
| <input type="checkbox"/> 7th Grade Class Advisor | <input type="checkbox"/> DECA Advisor | <input type="checkbox"/> Ntl. Honor Soc. Advisor |
| <input type="checkbox"/> 8th Grade Class Advisor | <input type="checkbox"/> Band Front Director | <input type="checkbox"/> Prom Director |
| <input type="checkbox"/> Freshman Class Advisor | <input type="checkbox"/> Marching Band Director | <input type="checkbox"/> Sixth Grade Camp Director |
| <input type="checkbox"/> Sophomore Class Advisor | <input type="checkbox"/> Asst. Marching Band Dir | <input type="checkbox"/> Student Council Advisor |
| <input type="checkbox"/> Junior Class Advisor | <input type="checkbox"/> Mentor | <input type="checkbox"/> Varsity "S" Advisor |
| <input type="checkbox"/> Senior Class Advisor | <input type="checkbox"/> Musicals Director | <input type="checkbox"/> Yearbook Advisor |

List past experience and qualifications for this position: (attach resume if you wish)

FORMS MUST BE SUBMITTED TO THE APPROPRIATE LEVEL FOR APPROVAL: (in this order)

Head Coach

Approve Disapprove Signature: _____ Date: _____

Athletic Director

Approve Disapprove Signature: _____ Date: _____

High School Principal

Approve Disapprove Signature: _____ Date: _____

Elementary Principal

Approve Disapprove Signature: _____ Date: _____