

HAZLETON AREA SCHOOL DISTRICT

1601 West 23rd Street
Hazleton, PA 18202
570-459-3221, ext. 81538
Fax: 570-459-3139

COACHING APPLICATION PACKET

Hazleton Area School District board policy adopted May 22, 2008 requires all applicants for coaching positions within the HASD to include the following:

- ☐ 1. Complete coaching application form
- ☐ 2. Submit a detailed resume including description and statistics from any previous coaching position(s)
- ☐ 3. Submit three letters of recommendation
- ☐ 4. Submit a one page essay on coaching philosophy, training regimens and goals
- ☐ 5. Submit Act 34 and Act 151 clearances (*see attached*)
- ☐ 6. Submit FBI fingerprint clearances (*see attached*)
- ☐ 7. Physical Examination and TB screening tests (*pending hiring*)
- ☐ 8. Proof of CPR Certification (*pending hiring*)
- ☐ 9. Proof of Lifeguard or Red Cross Swimming Coach Safety Training (*swim coach applicants only*)

Any misstatement of fact will constitute grounds for removing application for consideration. For further information, contact Fred Barletta, Athletic Director at: barlettaf@hasdk12.org or 570-459-3221, ext. 81539

NAME OF APPLICANT: _____

POSITION APPLYING FOR: _____

DATE RECEIVED BY ATHLETIC OFFICE: _____ / _____ / _____

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APPLICATION FOR COACHING/EVENT WORKER POSITION

****Event Workers Only Need to Complete Position Applying For Section of Application and
Obtain All 3 Required Clearances****

POSITION APPLYING FOR: _____

COMPLETE APPLICANT NAME: _____

ADDRESS: _____

HOME PHONE: _____ CELL PHONE _____

EMAIL ADDRESS: _____

EDUCATIONAL RECORD: _____ DEGREE EARNED: _____

HIGH SCHOOL: _____

COLLEGE: _____

OTHER: _____

SPORTS PARTICIPATION: _____

HIGH SCHOOL: _____

COLLEGE: _____

OTHER: _____

COACHING EXPERIENCE: _____

HASD _____

RECORDS: _____

OTHER: _____

WORK EXPERIENCE: (Present Employment)

NAME OF EMPLOYER: _____

ADDRESS OF EMPLOYER: _____

OCCUPATION: _____

DAYS/HOURS: _____

PREVIOUS EMPLOYMENT:

NAME OF EMPLOYER: _____

ADDRESS OF EMPLOYER: _____

OCCUPATION: _____

REFERENCES:

	NAME AND OCCUPATION	ADDRESS	PHONE
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

I hereby give my permission to contact the employers and references listed above.

Signature of Applicant

Date

HAZLETON AREA SCHOOL DISTRICT
PERSONNEL DATA SHEET

PLEASE PRINT CLEARLY

SOCIAL SECURITY NUMBER _____

FULL NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

BIRTH DATE _____

AREA CODE/PHONE NUMBER () _____ LISTED _____ UNLISTED _____

NAME OF CITY, BORO, TOWNSHIP WHERE EARNED INCOME TAXES ARE PAID _____

Have you paid your OPT/EMST Tax for the current year Yes No

POSITION YOU ARE APPLYING FOR _____ FULL TIME _____ PART TIME _____

BOARD APPROVAL DATE _____ FIRST DAY OF WORK _____

DEGREE PRESENTLY HELD _____

SPOUSE INFORMATION: NAME _____

SOCIAL SECURITY # _____ DATE OF BIRTH _____

EMERGENCY CONTACT INFO.: NAME _____

RELATIONSHIP _____ PHONE # _____

CURRENTLY PSERS RETIRE EMPLOYEE YES NO DATE RETIRED: _____

OFFICE USE ONLY

MARITAL STATUS _____ # OF DEPENDENTS _____

EIT CODE _____ OPT/EMST CODE _____ RETIRE CODE _____ JOB CODE _____

ARREST/CONVICTION REPORT AND CERTIFICATION FORM

(under Act 24 of 2011 and Act 82 of 2012)

Section 1. Personal Information

Full Legal Name: _____

Other names by
which you have
been identified: _____

Date of Birth: ____/____/____

Section 2. Arrest or Conviction

☐

By checking this box, I state that I have NOT been arrested for or convicted of any Reportable Offense.

☐

By checking this box, I report that I have been arrested for or convicted of an offense or offenses enumerated under 24 P.S. §§1-111(e) or (f.1) ("Reportable Offense(s)"). See Page 3 of this Form for a list of Reportable Offenses.

Details of Arrests or Convictions

For each arrest for or conviction of any Reportable Offense, specify in the space below (or on additional attachments if necessary) the offense for which you have been arrested or convicted, the date and location of arrest and/or conviction, docket number, and the applicable court.

Section 3. Child Abuse

☐

By checking this box, I state that I have NOT been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

☐

By checking this box, I report that I have been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

Section 4. Certification

By signing this form, I certify under penalty of law that the statements made in this form are true, correct and complete. I understand that false statements herein, including, without limitation, any failure to accurately report any arrest or conviction for a Reportable Offense, shall subject me to criminal prosecution under 18 Pa.C.S. §4904, relating to unsworn falsification to authorities.

Signature _____

Date _____

INSTRUCTIONS

Pursuant to 24 P.S. §1-111(c.4) and (i), the Pennsylvania Department of Education developed this standardized form (PDE-6004) to be used by current and prospective employees of public and private schools, intermediate units, and area vocational-technical schools.

As required by subsection (c.4) and (j)(2) of 24 P.S. §1-111, this form shall be completed and submitted by all current and prospective employees of said institutions to provide written reporting of any arrest or conviction for an offense enumerated under 24 P.S. §§1-111(e) and (f.1) and to provide notification of having been named as a perpetrator of a founded report of child abuse within the past five (5) years as defined by the Child Protective Services Law.

As required by subsection (j)(4) of 24 P.S. §1-111, this form also shall be utilized by current and prospective employees to provide written notice within seventy-two (72) hours after a subsequent arrest or conviction for an offense enumerated under 24 P.S. §§1-111(e) or (f.1).

In accordance with 24 P.S. §1-111, employees completing this form are required to submit the form to the administrator or other person responsible for employment decisions in a school entity. Please contact a supervisor or the school entity administration office with any questions regarding the PDE 6004, including to whom the form should be sent.

PROVIDE ALL INFORMATION REQUIRED BY THIS FORM LEGIBLY IN INK.

LIST OF REPORTABLE OFFENSES

- A reportable offense enumerated under 24 P.S. §1-111(e) consists of any of the following:

- (1) An offense under one or more of the following provisions of Title 18 of the Pennsylvania Consolidated Statutes:

▪ Chapter 25 (relating to criminal homicide) ▪ Section 2702 (relating to aggravated assault) ▪ Section 2709.1 (relating to stalking) ▪ Section 2901 (relating to kidnapping) ▪ Section 2902 (relating to unlawful restraint) ▪ Section 2910 (relating to luring a child into a motor vehicle or structure) ▪ Section 3121 (relating to rape) ▪ Section 3122.1 (relating to statutory sexual assault) ▪ Section 3123 (relating to involuntary deviate sexual intercourse) ▪ Section 3124.1 (relating to sexual assault) ▪ Section 3124.2 (relating to institutional sexual assault) ▪ Section 3125 (relating to aggravated indecent assault) ▪ Section 3126 (relating to indecent assault) ▪ Section 3127 (relating to indecent exposure) ▪ Section 3129 (relating to sexual intercourse with animal) ▪ Section 4302 (relating to incest) ▪ Section 4303 (relating to concealing death of child)	▪ Section 4304 (relating to endangering welfare of children) ▪ Section 4305 (relating to dealing in infant children) ▪ A felony offense under section 5902(b) (relating to prostitution and related offenses) ▪ Section 5903(c) or (d) (relating to obscene and other sexual materials and performances) ▪ Section 6301(a)(1) (relating to corruption of minors) ▪ Section 6312 (relating to sexual abuse of children) ▪ Section 6318 (relating to unlawful contact with minor) ▪ Section 6319 (relating to solicitation of minors to traffic drugs) ▪ Section 6320 (relating to sexual exploitation of children)
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 - (2) An offense designated as a felony under the act of April 14, 1972 (P.L. 233, No. 64), known as "The Controlled Substance, Drug, Device and Cosmetic Act."
 - (3) An offense SIMILAR IN NATURE to those crimes listed above in clauses (1) and (2) under the laws or former laws of:
 - the United States; or
 - one of its territories or possessions; or
 - another state; or
 - the District of Columbia; or
 - the Commonwealth of Puerto Rico; or
 - a foreign nation; or
 - under a former law of this Commonwealth.
- A reportable offense enumerated under 24 P.S. §1-111(f.1) consists of any of the following:
 - (1) An offense graded as a felony offense of the first, second or third degree, other than one of the offenses enumerated under 24 P.S. §1-111(e), if less than (10) ten years has elapsed from the date of expiration of the sentence for the offense.
 - (2) An offense graded as a misdemeanor of the first degree, other than one of the offenses enumerated under 24 P.S. §1-111(e), if less than (5) five years has elapsed from the date of expiration of the sentence for the offense.
 - (3) An offense under 75 Pa.C.S. § 3802(a), (b), (c) or (d) (relating to driving under influence of alcohol or controlled substance) graded as a misdemeanor of the first degree under 75 Pa.C.S. § 3803 (relating to grading), if the person has been previously convicted of such an offense and less than (3) three years has elapsed from the date of expiration of the sentence for the most recent offense.

CARDIAC-CONCUSSION-CPR and PIAA COACHING EDUCATION

All Hired Coaches must take a Cardiac and Concussion course prior to starting their position. These Cardiac and Concussion courses must be re-taken every year (July 1st thru June 30th). These courses can be accessed by going to the following website and clicking on the appropriate links:
<http://www.gopats.org> Complete the courses and print out the certifications and submit to the athletic office annually.

All Hired Coaches must have their CPR certifications and submit a copy of your certification card to the athletic office. You will be responsible to keep that certification updated as long as you coach within the district. CPR certifications can be obtained at your chosen site. Ex: some coaches use the American Academy of CPR & First Aid site.

All Hired Coaches (head, assistant, paid, or volunteer) must take the MANDATED PIAA Coaching Education Course and submit to the athletic office proof of course completion. This course only needs to be taken once and does not have to be updated or taken again. If you opt to complete this without attending such a course, it can be completed by contacting either of the 2 accredited facilitators:

National Federation of High Schools www.nfhslslearn.com

Human Kinetics www.asep.com