

# ATHLETIC SUPPLEMENTAL/ACTIVITY CONTRACT INTENT FORM

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Apt # \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone #: \_\_\_\_\_ E-Mail: \_\_\_\_\_

You **MUST** complete the form below, have your **background check** and **current pupil activity permit** on file at the Board Office **BEFORE** your contract is presented to the Board for approval.

**You will not be able to coach without a contract.**

Coaching Experience – List all Sports	Number of years	Level - Elementary, Junior High, High School	Criminal Background Check Rec'd	Current Pupil Activity Permit Date

**You are being offered the following supplemental position(s) with the Firelands Local School District.**

SELECT ONE		CONTRACT		FOR SCHOOL YEAR:		
HEAD	ASS'T	FULL	PARTIAL	20 _____ TO 20 _____		
				POSITION**	BLDG	STEP

**\*\*Please refer to FEA Agreement for correct position title.**

If you wish to fulfill this/these contract/s and agree with the stated salary step, please read the following paragraph, sign and date this form.

I have met personally with the athletic director and reviewed the information listed above. I am fully aware of all responsibilities relating to this/these supplemental position/s and request that my name be presented to the Firelands Board of Education for hiring. I further understand that if any changes need to be made to these contracts I must communicate directly with the athletic director where applicable.

Signature \_\_\_\_\_

Date \_\_\_\_\_

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I/we have met with the above named individual and have reviewed the contract/s and responsibilities of such. I/we now request that this person be hired for the contract/s as listed.

Athletic Director \_\_\_\_\_

Date \_\_\_\_\_

**(Coaching positions only)**

Superintendent's Initials \_\_\_\_\_

Date \_\_\_\_\_

Board approved \_\_\_\_\_