Portsmouth Youth Basketball (www.portsmouthyouthbasketball.com) Coach Application Form

Besides our kids, our Coaches are our most valuable asset. Thanks very much for volunteering your time for the benefit of our kids. It is greatly appreciated by all! In completing this application, please be as candid as possible. There are no right or wrong answers. This application will be made available to the PYB 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:	Phone #:	
Address:		
Town:	State:	Zip:

Coaching Experience

Please indicate whether head coach or assistant coach, sport, year, etc...

Recreational / In-house	Competitive / Travel	

Playing Experience

Please indicate whether you have any basketball playing experience and include years played, level of play (high school, collegiate, professional), other related info, etc...

Basketball Coaching certificates or licenses held?

Desired Age Level (ie, 10U Boys) :

Willing to be an active assistant co	bach if you are not elected as a Head Coach?	🗆 Yes	🗆 No

Please explain how you will allocate playing time?

What is your general philosophy for the age group you are applying for?

Additional pertinent information regarding your ability/desire to Coach for PYB:

Please elaborate on your thoughts regarding interaction between coaches and referees during games. Should coaches be yelling at referees? Should they be questioning calls? How would you handle a situation where you disagreed with how a ref was calling a game and you think player safety was at risk?

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Please provide the names of 3 ref	erences that we may contact:
Name:	Phone #:
Name:	Phone #:
Name:	Phone #:
Signature:	Date:
Preferred submission: send e	mail to info@portsmouthyouthbasketball.com

fax to 401-427-6020

Electronic signature is accepted with email submission.