

**EASTERN MICHIGAN UNIVERSITY CLUB SPORTS OFFICE**

**COACH/INSTRUCTOR PROFILE: 2019 – 2020**

**(Mandatory for all designated coaches/instructors, and due within 7 days after coach's first day)**

Club Sport: \_\_\_\_\_ Start Date: \_\_\_\_\_

Coach/Instructor Name: \_\_\_\_\_

Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Eve. Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

EMU Affiliation: \_\_\_\_Student \_\_\_\_Faculty/Staff \_\_\_\_Alumni \_\_\_\_Not Affiliated

Please list your playing and coaching/instructing experience in this sport:

Playing Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Coaching or Instructor Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Coaching or Instructor Certifications or Degrees: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

First Aid/CPR Certifications and Expiration Dates: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please list Coaching/Instructor references:

**Names**

**Day Phone #**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Approved by Club President: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Club Sports Office: \_\_\_\_\_ Date: \_\_\_\_\_

**EASTERN MICHIGAN UNIVERSITY**  
**Club Sports Program**  
**Coach/Instructor Contract: 2019-2020**  
**(Due: 7 days after coach's starting date)**

Name: \_\_\_\_\_ Sport Club: \_\_\_\_\_  
Address: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ Phone: \_\_\_\_\_  
(cell) \_\_\_\_\_ (work) \_\_\_\_\_

I, (name) \_\_\_\_\_, hereby enter into the following assignments and terms for instructing/coaching (circle one):

- A. Said person agrees to be present all regularly scheduled practices and, if applicable, contests.
- B. Said person states that he/she is capable and willing to perform instructing/coaching duties as described in the Sport club Handbook and as stated specifically below, and as listed in the club's constitution:
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- B. Said person will perform these duties for the period beginning (date to start) \_\_\_\_\_ and ending (date to end) \_\_\_\_\_
- D. For such said person will be paid \_\_\_\_\_ under the following disbursement procedure:
- \_\_\_\_\_
- \_\_\_\_\_
- E. This agreement may be terminated by either party by completing the following:
- \_\_\_\_\_
- \_\_\_\_\_

We, the undersigned agree to the terms and statements listed above:

Club President's signature \_\_\_\_\_ Date \_\_\_\_\_

Instructor/Coach's signature \_\_\_\_\_ Date \_\_\_\_\_

Sport Club Coordinator's review: Date \_\_\_\_\_