

**NORTH DIVISION  
CAMBRIDGE LITTLE BASEBALL LEAGUE, INC.**

**COACHING APPLICATION**

NAME: \_\_\_\_\_ Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ OCCUPATION/JOB TITLE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**1. Please describe your previous baseball experience; include number of years and at what level (s). List any specific coaching experience; include organization name, number of years, dates of service and at what level (s).**

Baseball  
Experience: \_\_\_\_\_  
\_\_\_\_\_

Coaching  
Experience: \_\_\_\_\_  
\_\_\_\_\_

**2. Are you prepared to make a commitment for at least one full season which includes attending a majority of the 16 regular season games, 4-6 play-off games and weekly practices? Any restrictions please explain?**

\_\_\_\_\_

**3. List any other community affiliations (Clubs, Service Organizations, etc.)**

\_\_\_\_\_  
\_\_\_\_\_

**4. Do you have a valid driver's license? \_\_\_\_\_**

**5. List any Special Certifications: ( i.e. CPR, Medical, etc.)**

\_\_\_\_\_

**6. Have you ever been refused participation in any other youth program? \_\_\_\_\_ If yes, explain why: \_\_\_\_\_**

\_\_\_\_\_

I understand that in order to protect our children, the North Division may perform a background check on me that may include a review of criminal and child abuse records maintained by governmental agencies. I understand that if appointed, my position is conditional upon the North Division receiving no inappropriate information on my background. By signing below, I hereby release and agree to hold harmless from liability the North Division, its officers, volunteers, or any other person or organization that may provide such information. I also understand that regardless of previous appointments, I may not be appointed to a volunteer position. If appointed I understand that, I am subject to suspension by the President and removal by the Board of Directors. **All inquiries are confidential.**

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_