

## **Employment Application**

Contact ar	nd Background Information			
First Name		Last Name		
E-mail Address				
Home Phone		Cell Phone		
Street				
City		State	Zi	p Code
Age	Date of Birth (Mo/Day/Year)	Gender Male	Female	
If not US Citizen	, what Nationality?			
If not US Citizen, have you ever been refused a Visa to the US?		If yes, please provide deta	ils.	
Do you have any	/ criminal convictions?	If Yes, please give details		
	een accused of, or involved in ving the sexual or physical	If Yes, please give details		

Coaching/Teaching Qualifications		
List all <b>Soccer</b> certifications, licenses, levels and year obtained expect to receive your certification)	(if currently attending, state what	it course and date you
List all other teaching certifications and year obtained (if current receive your certification)	ly attending, state what course a	nd when you expect to
List Other Coaching/Teaching Certifications	First Aid Certificati on?	CPR Certification?
Soccer Experience		

List all **Soccer Coaching Experience** (include dates, ages and player abilities worked with):

List all **Soccer Playing Experience** to include High School, College, Club, Professional level, etc. (include dates, ages, level of play)

Education					
High School (provide name of high school, city, state, graduation date)					
College/University (include name of college/university, degree, graduation date)					
Current Employment					
Employer Name	Employer Phone				
Employer Address (street, city, state, zip)					
References					
First Name	Last Name				
E-mail Address	Phone				
First Name	Last Name				
E-mail Address	Phone				
I confirm that the information given on this form is, to the sufficient cause for dismissal.	e best of my knowledge, true and correct. Any false statement may be				
Signature					

Please email completed form to: Eric@psaelitesoccer.com or mail to: PSA ELITE SOCCER USA; P.O. Box 45; New Hyde

Date

Park, NY 11040