



NEW COACH INFORMATION

Thank you for your interest in joining the coaching staff of the Lucas Local Schools Athletic Department! Please read the following information carefully, as it will guide you through the remaining steps of the hiring process and help to ensure that your coaching career can begin as soon as possible.

All information below must be completed before you may be approved for contact with any Lucas students, in any coaching situation. Without full completion of this information, it is unlawful for the District to provide you with any payments or reimbursements. The Head Coach of each Varsity program is ultimately responsible for the prospective assistant coaches' completion of these requirements and ensuring that this information is provided to the Athletic Director in a timely manner to allow for Board of Education action.

1. **Coaching Application:** Complete application available at www.lhscubs.com or in the High School office and submit to AD, along with the two documents linked at the bottom of the application.
2. **SAFE Account Creation:** Visit <https://safe.ode.state.oh.us/portal> to create an account in order to apply for (and renew) your credentials.
3. **Background Check:** Must complete a BCI/FBI electronic background check, as outlined on the Pupil Activity Validation application, and submit to the Ohio Department of Education Licensure Office. Background checks may be completed at the Mid-Ohio Educational Service Center, Sheriff's Office, police Department or any number of local agencies (<http://www.ohioattorneygeneral.gov/Business-and-Non-Profits/Business/Webcheck/Webcheck-Community-Listing>). This certification must be renewed per Ohio Department of Education guidelines.
4. **CPR & AED Certification:** Must obtain certification for not less than twelve (12) months and submit proof to the AD. This certification must be renewed as outlined in the program you choose to complete for certification.
5. **First Aid Training for Coaches:** This training can be completed in one of four ways: a.) Complete a four-hour sports first aid course offered by a provider that is approved by the State Department of Education (ODE); b.) Complete one of the following national sports first aid course programs: the American Sport Education Program, the American Red Cross Sport Safety Training course, or NFHS First Aid for Coaches (www.nfhslearn.com); or c.) Complete college course work in sports first aid; d.) Have one of the following licenses, M.D., D.O., R.N., EMT, A.T.C. This certification must be renewed each time you renew your PAV.
6. **Pupil Activity Validation:** The prospective coach will submit an application for the Pupil Activity Supervisor Permit to the ODE along with a processing fee, after obtaining the Superintendent's signature. The ODE will issue the permit upon verification of completion of the above-mentioned sports first aid course and background check. On the application for the Pupil Activity Supervisor Permit, you will have the choice to send your certification to either your home address or to the District. If you choose to have the certification sent to your home address, it is your responsibility to submit the Employer Copy to the AD. This certification must be renewed as listed on the certification received from the Ohio Department of Education.
7. **Fundamentals of Coaching:** Must obtain certification through the National Federation of High School's learning center at www.nfhslearn.com and submit proof to the AD. This certification currently never needs to be renewed.
8. **Concussion in Sports:** Must obtain certification through the National Federation of High School's learning center at www.nfhslearn.com and submit proof to the AD. This certification currently never needs to be renewed.
9. **Clean Drug Test:** If required in accordance with the Department of Transportation standards. Completion of a drug test need will need to be completed as directed by the AD.
10. **Employment Forms:** Must visit the District Office within the Elementary School to complete and submit the following forms to the Payroll Office after the approval of your contract by the Board of Education;
 - a. Local, State & Federal Tax Forms
 - b. STRS or SERS Forms depending on certification
 - c. Direct Deposit Authorization Form
 - d. Taxation Forms
 - e. Copies of your Social Security Card, Driver's License, Birth Certificate or Passport
11. **Employment Contract:** Must be signed and submitted in the Payroll Office within 10 days of approval of your contract by the Board of Education.

If you have any questions about the hiring process, please call 419-892-2338 to reach the Athletic Director x224 or the Payroll Office x213.

Sportsmanship...Make it a tradition...Practice it for Life!



Lucas Local Schools Athletic Department



5 First Ave. Lucas, OH 44843 419-892-2338 x 236 419-892-1138 (fax)

COACHING APPLICATION

The Lucas Local Schools considers applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or handicap, or any other legally protected status.

First Name: _____ Middle Initial: ____ Last Name: _____ Birth date: __/__/__

Home Address: _____ City: _____ State: _____ Zip: _____

E-mail Address: _____ Cell Phone (____)____-____ Home Phone (____)____-____

Position(s) Applying For: _____

How did you hear about this position? (check all that apply) __School Posting __Newspaper __On-line __Coach Contact __Other

Why are you interested in the position(s)? _____

Coaching experience: Provide sport, location, years, responsibilities and supervisor of relevant coaching experience.

1. _____
2. _____
3. _____
4. _____

COLLEGE ATTENDED (if applicable) _____ Dates Attended _____

Varsity Sports

Years Active

Awards, Letters, Honors?

1. _____
2. _____
3. _____

Other collegiate activities or recreational sports you were involved in:

1. _____
2. _____
3. _____

HIGH SCHOOL ATTENDED _____ Dates Attended _____

Sports

Years Active

Awards, Letters, Honors?

1. _____
2. _____
3. _____

Other High School activities or recreational sports you were involved in:

1. _____
2. _____
3. _____

Employment and/or Educational Status: *Employed:* __Full-time __Part-time __Unemployed __Retired *Student:* __Full-time __Part-time

References: Provide name, address & phone number of individuals who can provide accurate information about your qualifications.

1. _____
2. _____
3. _____
4. _____

In compliance with State Law, OHSAA & Board of Education Policy, all coaches must obtain & maintain the following in order to be approved for contact with students: (check all that you have already obtained and submit proof to the Athletic Director)

- BCI & FBI Background Check: *Submit electronically to the ODE Licensure Office - NOT Lucas!*
- Pupil Activity Validation obtained from the ODE
- CPR & AED Certification
- NFHS Fundamentals of Coaching Certification*
- First Aid / Sports Injury Prevention Certification
- NFHS Concussion in Sports Certification*
- Negative Drug Test (if required in accordance with Department of Transportation Standards - check with the AD)

Please note: In order to appear on a Board of Education agenda for approval, this application and proof of all above items must be submitted to the AD, at least one week prior to a Board of Education meeting.

Read and submit the following along with this application to the Athletic Director at the address above:

<http://www.publicsafety.ohio.gov/links/HLS0037.pdf>

http://www.publicsafety.ohio.gov/links/terrorist_exclusion_list.pdf

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