



LONG ISLAND JUNIOR SOCCER LEAGUE COACHING ACADEMY COACH'S COURSE APPLICATION



Office use only
Course Number _____

PLEASE FILL OUT ALL INFORMATION BELOW COMPLETELY

Course Date: _____

Course applying for (circle): 4v4 Diploma 7v7-9v9 Diploma 11v11 Diploma

Name: _____ Club: _____

Address: _____ Phone: _____

Town: _____ State: _____ Zip: _____

Email: _____

Certifications currently held: _____

Current Coaching level(s): Intramural Travel High School College

Other: _____

Age Group(s): _____ Boys Girls

Current United Soccer Coaches Member? Yes No
(United Soccer Coaches formerly NSCAA)

If yes, United Soccer Coaches member number: _____

Please Note:

Coaches should come prepared to participate in class and physical activities.
Remember to bring a ball, shorts, sneakers, writing materials, water and a good attitude.

You are required to attend all sessions to receive credit for the course.

Any coach who is more than half an hour late will not receive credit for that session and will have to make that session up at another location.