



COMPLETE THIS FORM ONLY IF YOU INTEND  
TO BE A HEAD COACH or MAIN CONTACT.  
USE YOUR CHILDS ONE (1) BUDDY FORM TO PAIR  
YOURSELF WITH AN ASSISTANT OR CO-COACH.



Dear Potential Coach;

Thank you for your interest in being an NFL Flag Football coach with the Cedar Falls Recreation Division. This program has proven to be great fun for participants and coaches. Games are played to win but not at all costs. Sportsmanship, fundamentals, and enjoyment of the great sport of football are the main focus. If you agree that teaching all players to love football and being part of a team is the best way to develop players at this age, please complete all of the following forms. This information will let us know more about you as a potential coach and enable us to form teams that best meet the needs of both players and coaches. Please complete and return the Questionnaire and Background Check forms to the Recreation Center. This practices are scheduled to start after August 20 includes a 6 game season concluding Mid-October. Games are 5 on 5 and teams will contain a maximum of 10 players. Most teams will consist of players from the same elementary school but in some cases schools will need to be divided and/or combined depending upon registration numbers. If you are selected to be a NFL Flag Coach you will be notified of the coaches meeting where you will receive equipment, team rosters and game schedules for the upcoming season. If you have any additional questions please contact Brock Goos at the Cedar Falls Recreation Center 273-8636.

Thank you for your interest,  
Brock Goos; Sports Program Supervisor

## Football Coaches Questionnaire

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone # Day \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_

Mailing Address \_\_\_\_\_

Email Address \_\_\_\_\_

School preference \_\_\_\_\_ Grade Level: 1<sup>st</sup> & 2<sup>nd</sup> 3<sup>rd</sup> & 4<sup>th</sup> 5<sup>th</sup> & 6<sup>th</sup>

Do you have a child in this school and age group? (Name) \_\_\_\_\_

Relative Experience?  
\_\_\_\_\_

How many times a week and when would you anticipate being able to have your team practice?  
\_\_\_\_\_

Do you have any conflicts with the game schedule? \_\_\_\_\_

1st & 2nd Grade Saturday Mornings

3rd & 4th Grade Thursday evening and/or Saturday Mornings

5th & 6th Grade Tuesday and/or Thursday Evenings

If so please specify \_\_\_\_\_

Potential Coaches will also need to register with the NFL at <https://nflflag.com/register>

**If you and another wish to coach together, you must use your child's one buddy form request to get your children on the same team.** If you would like more info please call Brock Goos at the Cedar Falls Recreation Center 273-8636.



**DISCLOSURE TO EMPLOYMENT APPLICANT OR  
VOLUNTEER REGARDING BACKGROUND INVESTIGATIONS**

In connection with your application for employment or volunteer service, please be advised we will conduct a reference check. We will check criminal history and also complete a driving record check for positions that involve, or have the potential to involve, driving City vehicles. Other information will be obtained by contacting your previous employers and/or references.

By signing below, I authorize investigation of all statements contained within my application materials for employment as may be necessary in arriving at an employment decision. I further authorize investigation of my driving record and criminal history. If employed, I understand that false or misleading information given in my application materials or interview(s) may result in immediate discharge.

Signature \_\_\_\_\_

Date Signed \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please PRINT the following information:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Position Being Considered For \_\_\_\_\_

Driver's License Number \_\_\_\_\_

Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_