

**Coaches Application**

**Eastern Zone Diversity Summit**

**June 25-28, 2015**

**University of Maryland, College Park, MD**

***Hosted Potomac Valley Swimming***

DEADLINE APPLICATION MAY 1ST,

LSC VIRGINIA SWIMMING INC

LSC Application Deadline **April 24nd**

Return application to (LSC Representative) \_PETER MALONEY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_365 BELLE PLAINS ROAD, FALMOUTH VA. 22405\_\_

Applicant must be a USA Swimming coach member.

**PLEASE PRINT ALL INFORMATION**

|  |  |  |  |
| --- | --- | --- | --- |
| Name |  | Cell phone |  |
| Address |  |  |  |
| City,State,Zip |  |  |  |
| Email |  | Gender |  |
|  |  |  |  |

**COACHING EXPERIENCE** (list most recent position first)

|  |  |  |
| --- | --- | --- |
| **Full name of team** | **Dates/Years at that position** | **Title or position** |
|  |  |  |
|  |  |  |
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**CAMP EXPERIENCE** (list most recent position first)

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| --- | --- | --- |
| **Type of camp (Zone, LSC)** | **Type of Activity** | **Your position (head coach, asst coach, director, etc)** |
|  |  |  |
|  |  |  |

**OTHER RELEVANT EXPERIENCE**

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Below, please indicate the reasons you want be selected as the coaches representative at the Eastern Zone Diversity Select Camp. What do you expect to contribute? What do you expect to derive from the experience? Use reverse side if necessary.

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All applications must be received by the Diversity Chair by **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**.

I understand that all coaches accepted for participation at the Eastern Zone Diversity Select Camp must be coach members of USA Swimming and must abide by the Code of Conduct. I attest that the above information is true and accurate.

Coach’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_