**Carolina United Soccer Association (CUSA)**

**Intent to Coach Form**

**2022-2023**

**General Information**:

Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State\_\_\_\_\_\_\_\_\_\_Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Team you wish to coach:**

Age\_\_\_\_\_\_\_Gender\_\_\_\_\_Level\_\_\_\_\_\_\_\_\_\_\_Years Coaching\_\_\_\_\_\_\_Or Open to any age\_\_\_\_\_\_\_\_\_\_

Coaching License Level\_\_\_\_\_\_\_\_\_Date Awarded\_\_\_\_\_\_\_\_\_\_\_Open to obtaining coaching license?\_\_\_\_

Do you hold a referee certification? Grade/Year\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you were recommended to be a CUSA Coach by a member of CUSA, please give their name, phone number and email (if known)

Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone/email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NSCAA Member? Yes or No

**Soccer Coaching/Playing Resume**:

List coaching past coaching assignments (any sport):

List any soccer playing experience:

Discuss your plans for the coming season and why you will make an excellent youth soccer coach for CUSA players:

Please forward the form to Chuck King, Director of Coaching at cking20140@aol.com any questions call

703-505-9971