**OACA COACH OF THE YEAR APPLICATION**

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**Please complete the printable application below, and send via fax, mail or email to the OACA office. You can also fill out our Word version electronically and send as an attachment via email. Please contact us if you have any questions. Thank you.**

**1) Contact Information**

**Name -**

**School -**

**Sport -**

**Classification ( 1A-6A) -**

**Men or Women -**

**Athletic Director -**

**Principal’s Name -**

**Home Address -**

**Address Continued -**

**City -**

**State -**

**Zip/Postal Code -**

**Home Phone -**

**Cell Phone -**

**Email-**

**2) Last season’s record:**

**3) Are you currently a member of OACA:**

**4) Total Years Coaching:**

**5) Coaching Background - Last 5 years**

**a) Wins/Losses/Ties -**

**b) District Championships -**

**c) League Championships -**

**d) Runner-up Finalists -**

**e) State Championships -**

**6) Coaching Background - Career Record**

**a) Wins/Losses/Ties -**

**b) District Championships -**

**c) League Championships -**

**d) Runner-up Finalists -**

**e) State Championships -**

**7) Offices held in Local, State and National Coaches Associations:**

**8) Coaching Honors:  including Regional and State Coach of the Year, Sport Association Honors and local honors, etc. :**

**9) Involvement in School (Other Coaching, Activities, etc):**

**10) Professional and/or Coaching Associations you belong to:**

**11) In one or two sentences, state your philosophy of athletics:**

**You can submit this application via mail, fax, or email. Please make sure application is filled out completely before submitting. Please contact us via email or phone to confirm that the application has been received.**

**FAX - 541-928-1810**

**Email -** [**melissa@oregoncoach.org**](mailto:melissa@oregoncoach.org)

**Mailing Address - 222 First Avenue West, Suite 220, Albany, OR  97321**