

## 2022 USA Games COACHES APPLICATION FORM

GENERAL INFORMATION		
Name:	Gender: M ( ) F ( ) I	Birth Date:
Volunteer Form on File: Y N	1	
Home Address:		
City:		
Home Phone: ()	Work Phone: (	
Fax: (	E-mail:	
Do you have a valid driver's license?	Yes ( ) No ( ) Expiration Date:	:
Social Security Number:		
Place of Employment:		
Address:		
City:	State:	Zip:
SPORTS BACKGROUND INFORM	IATION	
Please rank in order of preference the You must be certified in the sport you	1 1 11 0	t the 2022 USA Games.
After each sport selected, indicate the	number of years that you have bee	en involved in that sport.
( ) Athletics Co	oach ( ) Bocce Co	oach
( ) Traditional	Basketball Coach	
( ) Traditional	Basketball - Athlete as Coach	

## RESUME WITH THIS APPLICATION

All applications are due to Special Olympics Rhode Island by February 26, 2021

Return to:

Special Olympics Rhode Island, 370 George Washington Highway, Smithfield, RI 02917 Attention: Selection Committee 2022 USA Games