

RED RIVER SOCCER CLUB (RRSC) COACHING APPLICATION

Today's Date: 11/30/2006

PERSONAL INFORMATION:

Name: Matt Noah	Home Phone : 701.282.9344
Address: 3528 Harrison Street South	Cell Phone: 701.541.6809
City: Fargo	Employed By: NDSU
State: ND	Work Phone: 701.231.8956
Zip Code: 58104	E-mail Address: matt.noah@pobox.com

COACHING EXPERIENCE:

Youth Soccer Coaching Experience:
(Additional Comments Here):
I coached 2 season of U9 Boys Competitive and 6 years of recreational.

High School Soccer Coaching Experience:
(Additional Comments Here): none

College Coaching Experience:
(Additional Comments Here): none

Soccer Camp Coaching Experience: none
(Additional Comments Here):

What license level do you hold? Minnesota State D; earned in 2005/2006

Club Name: CC United & RRSC
Player Level: Recreational: Competitive:
Coaching Level: Head Coach Assistant
Gender: Boys Girls Age(s)_pre-K to U11
Number of Years Youth Coaching: 6
High School Name:
Player Level: Varsity JV Other
Coaching Level: Head Coach Assistant
Gender: Boys Girls
Number of Years HS Coaching:
College Name:
Player Level: Varsity JV Other
Coaching Level: Head Coach Assistant
Gender: Men Women
Number of Years College Coaching:
Camp Name:
Player Level: Youth HS College
Coaching Level: Camp Head Coach
Camp Clinician
Gender: Boys Girls Both
Number of Years Camp Coaching:
Coaching Awards or Achievements:

PLAYING EXPERIENCE: none

Youth/Club Team:	Position(s):	Awards:
High School :	Position(s):	Awards:
College Team:	Position(s):	Awards:
Other (ODP, Pro, etc):	Position(s):	Awards:

REFERENCES:

NAME	RELATIONSHIP	PHONE
<i>Jonathan Tudor</i>	<i>Chan/Chaska United Director of Coaching</i>	<i>612.889.0668</i>
<i>Matt Thuli</i>	<i>Holy Family H.S. Athletic Director & Asst. Soccer Coach (Rec)</i>	<i>952.443.3899</i>
<i>Keith Abrahamson</i>	<i>Assistant Coach (Rec) & Parent of Competitive player</i>	<i>952.470.8443</i>
<i>Kim Grott</i>	<i>RRSC Assistant Coach, Rec, 2nd Grade</i>	<i>701.232.2231</i>

Please put an "X" behind your preference of Gender of the team you are applying for:

BOYS _____
GIRLS _____
EITHER _____

Please put an "X" behind your preference of Age of the team you are applying for:

U9 (6v6) _____
U10 (6 v 6) (12 Max roster size) _____
U11 (8 v 8) (14 Max roster size) _____
U12 (8 v 8) (14 Max roster size) _____
U13 (11 v 11) (18 Max roster size) _____
U14 (11 v 11) (18 Max roster size) _____
U15 (11 v 11) (18 Max roster size) _____
U16 (11 v 11) (18 Max roster size) _____
U17 (11 v 11) (18 Max roster size) _____
U19 (11 v 11) (18 Max roster size) _____
Any Age _____

Please put an "X" behind your preference of the Player Level of the team you are applying for:

CLASSIC I _____ CLASSIC II _____ EITHER _____

Please put an "X" behind your preference of the Coaching Level of the team you are applying for:

HEAD _____ ASSISTANT _____

Please send completed coaching application to:

Red River Soccer Club
3220 18th St. S. Suite 8E
Fargo, ND 58104
(701) 271-9065
Attn: Coaching Director

Or E-mail to:
redriversoccer@cableone.net