

El Camino Real Charter High School
Athletics Office

REQUEST FOR ONE PERIOD COACH AUTHORIZATION

EC § 44258.7 (B) allows full-time, permanent or probationary, teacher who holds a credential in a subject other than physical education to coach a competitive sport for which the students receive physical education credit for ONE period a day if the teacher has completed a minimum of 20 clock hours of first aid instruction appropriate to the specific sport.

Teacher Name (first name, last name):	CAMP JASON	Employee No:	170504711
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Competitive Team Sport Requested: _____

Period No. (Only one allowed)	Course Number	Grade Level	Course Title
6	330403	9-12	Aquatics

Administrator Certification of Requirements to qualify have been met. (ALL areas must be satisfied):
This section must be completed and signed by a certificated administrator.

- Hold a valid California teaching credentials obtained via completion of a BA degree and teacher preparation program that included student teaching
- Completed 20 clock hours of first aid instruction appropriate to the sport

Administrator's Name (print): Dean Bennett

Position Title: Admin Director

Administrator's Signature: 

Date: 11/4/22

TEACHER CONSENT TO THE ASSIGNMENT (Must be completed by teacher)

I, CAMP JASON, agree to teach the above listed courses during the 2022-2023 fiscal year.
(print name - first name, last name)

Teacher's Signature: 

Date: 11/3/22

EXECUTIVE DIRECTOR VERIFICATION OF REQUEST AND CONSENT

Executive Director Name (print): DAVID HUSSEY

11/4/2022

Executive Director's Signature: 

Scan/Email
for
ms
to:
HR
@e
crc
hs.
net

Date: _____

Based on LAUSD HR form

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Teacher Name <small>(first name_last name):</small>	Jason Camp	Employee No:	170504711
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Competitive Team Sport Requested: _____

Period No. <small>(Only one allowed)</small>	Course Number	Grade Level	Course Title
7	330721	9-12	LACROSSE

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- Completed 20 clock hours of first aid instruction appropriate to the sport

Administrator's Name (print): Dean Bennett


Position Title: Administrative Director

Administrator's Signature: 

Date: 11/3/22

TEACHER CONSENT TO THE ASSIGNMENT *(Must be completed by teacher)*


I, Jason Camp, agree to teach the above listed courses during the 2022-2023 fiscal year.
(print name – first name, last name)

Teacher's Signature: 

Date: 11/3/22

EXECUTIVE DIRECTOR VERIFICATION OF REQUEST AND CONSENT

Executive Director Name (print): David Hussey

Executive Director's Signature: 

Date: 11/3/22

Scan/Email forms to: HR@ecrchs.net

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Teacher Name <small>(first name, last name):</small>	Camille King	Employee No:	160117881
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Competitive Team Sport Requested: _____

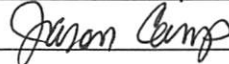
Period No. <small>(Only one allowed)</small>	Course Number	Grade Level	Course Title
6	330935	9-12	TRK & FLD, VAR (Track and Field)

Administrator Certification of Requirements to qualify have been met. (ALL areas must be satisfied):
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- Completed 20 clock hours of first aid instruction appropriate to the sport

Administrator's Name (print): Jason Camp

Position Title: Administrative Director

Administrator's Signature: 

Date: 11/3/22

TEACHER CONSENT TO THE ASSIGNMENT *(Must be completed by teacher)*

I, Camille King, agree to teach the above listed courses during the 2022-2023 fiscal year.
(print name – first name, last name)

Teacher's Signature: 

Date: 11/3/22

EXECUTIVE DIRECTOR VERIFICATION OF REQUEST AND CONSENT

Executive Director Name (print): David Hussey

Executive Director's Signature: 

Date: 11/3/2022

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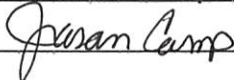
Teacher Name <small>(first name_last name):</small>	Alyssa Lee	Employee No:	141208901
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Competitive Team Sport Requested: _____

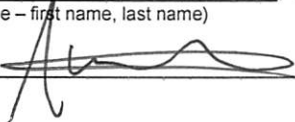
Period No. <small>(Only one allowed)</small>	Course Number	Grade Level	Course Title
6	330939	9-12	VLLYBL, V BOYS (Boys Volleyball)
	330941	9-12	SAND VOLLEYBL (Beach Volleyball)

Administrator Certification of Requirements to qualify have been met. (ALL areas must be satisfied):
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- Completed 20 clock hours of first aid instruction appropriate to the sport

Administrator's Name (print): Jason Camp Position Title: Administrative Director
 Administrator's Signature:  Date: 11/3/22

TEACHER CONSENT TO THE ASSIGNMENT *(Must be completed by teacher)*

I, Alyssa Lee, agree to teach the above listed courses during the 2022-2023 fiscal year.
(print name – first name, last name)
 Teacher's Signature:  Date: 11/3/2022

EXECUTIVE DIRECTOR VERIFICATION OF REQUEST AND CONSENT

Executive Director Name (print): David Hussey
 Executive Director's Signature:  Date: 11/3/2022

Scan/Email forms to: HR@ecrchs.net