



**DICKSON COUNTY BOARD OF EDUCATION**

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**Principal Recommendation for Non-Faculty Coach**

I recommend \_\_\_\_\_

To serve as **Head** **Assistant** **Volunteer** Coach In a: **Paid** **Non-paid** Position

Of \_\_\_\_\_ (Sport)

At \_\_\_\_\_ (School)

For the 20 \_\_\_\_\_ - 20 \_\_\_\_\_ school year.

We have discussed TSSAA Expectations and applicable Dickson County School policies, procedures, and expectations.

The candidate has completed the four required with TSSAA our TMSAA. **Yes** or **No**

Principal Signature \_\_\_\_\_

Date \_\_\_\_\_

*Principals: Complete the recommendation form and send to HR Office. The applicant will be contacted by the HR office to sign their contract (if applicable) and complete background checks. This is to be completed prior to having any contact with students.*

*\*Contact information of Recommended Non-Faculty Coach: \_\_\_\_\_*

FOR OFFICE USE ONLY:

HR: \_\_\_\_\_ PAYROLL: \_\_\_\_\_ PRIN: \_\_\_\_\_