

Open Position-ODP Program

Effective immediately, the position of ODP Technical Director with the State ODP Program is open. If you are interested in applying for this position, please send your Application and Soccer resume by **February 5, 2010** to:

The CYSA Office, Attn: ODP
1040 Serpentine Lane, Suite 201
Pleasanton, CA 94566-4754
Fax #: 925-426-9473

Interviews are TBA. The description of this position is as follows:

ODP TECHNICAL DIRECTOR

- A. Shall hold a current USSF "A" license.
- B. Shall report to the Second Vice Chairman on coach and player development matters and to the Executive Director of the Association on employment matters.
- C. Shall work closely with the State Coaching Director and State Program Coordinator on all aspects of the ODP, including all following categories.
- D. Shall provide leadership and guidance for the CYSA-N ODP in all areas of soccer and shall be responsible for communicating and directing objectives, philosophy, and procedures for the ODP.
- E. Shall work with the CYSA-N District ODP Committee Chairman, Region IV Staff and National ODP Committee, and other soccer professionals on the implementation of the technical and tactical progressions for the various ODP State Pools.
- F. Responsible for recruitment and recommendation of candidates for ODP Staff Coaching positions. Appointment is by the Second Vice Chairman with the advice and consent of the Board of Directors.
- G. Responsible for the evaluation of State ODP Program Coaching Staff.
- H. Participate in the amendment of the State ODP Manual.



**APPLICATION
FOR
OLYMPIC DEVELOPMENT PROGRAM
STATE COACHING and TEAM STAFF**

(Please read carefully and complete all sections in print or type)

Position Seeking: *(circle appropriate position)* **Other:** _____

ODP Technical Director: <input type="checkbox"/>	Head Coach: <input type="checkbox"/>	Assistant Coach: <input type="checkbox"/>
Team Administrator <input type="checkbox"/>	Preferred Age Group: <input type="checkbox"/>	Preferred Gender: <input type="checkbox"/>

Date of application: _____ Applicant's Date of birth: _____

Last Name: _____ First Name: _____ MI: _____

Address: _____ City: _____ Zip: _____

Home#: _____ Work #: _____ Cell #: _____

Email: _____ Fax Number: _____

Coaching License Status: _____ Obtained : (year) _____ Expiration Date: _____

Current Coaching Status:

Head Coach: _____ Trainer: _____ Club Director: _____
 Team: _____ Gender/Age: _____ District: _____ League: _____
 Years Affiliated with CYSA-N Leagues and Coaching programs: _____

Professional References: (Soccer related)

*Please list two past supervisors not related to you who have knowledge of your qualifications for the position for which you are applying.

1) Name: _____ Title: _____

Address: _____ Phone: _____

2) Name: _____ Title: _____

Address: _____ Phone: _____

***Please attach soccer resume to this application**

I have read, and will abide by the US Youth Soccer and CYSA Olympic Development Program Regulations and Policies, the CYSA Constitution, Bylaws, General Procedures and any Specific Rules, which govern this program.

X _____ Date: _____
 Applicant's signature

<i>Official State use only:</i>	
Received by: _____	Date: _____
Resume attached: _____	Position offered: _____ Seasonal Year(s): _____