

Notes on the Use of the Following Form:

1. After downloading the form it should be saved (**Save As...**) to a secure place on your computer or network drive with a name identifying it clearly teamname.level.year (e.g. "football.varsity.10-11)
2. The roster on page 1 (and page 2 for large teams) should be filled out and submitted by e-mail to jrisener@oceansideschools.org AS AN ATTACHMENT* at least five days prior to your first officiated contest. **PLEASE PUT TEAM MEMBERS IN ALPHABETICALLY BY LAST NAME.**
3. At the conclusion of your season you should access the file, update the roster by adding, removing, modifying any student information as needed. At this time you should also complete the End of Season Team/Individual reports and Inventory and Delinquent Items reports. The document should then again be submitted by e-mail to jrisener@oceansideschools.org AS AN ATTACHMENT* no more than two weeks after your final contest.
4. Please note that this is a FORM which should allow you to only input information in the gray shaded areas. Where possible we have provided drop-down boxes to relieve you of typing. You can move from one box to another either by clicking in the box with the mouse OR by Tabbing from one box to the next OR by using the Arrow keys to move forward and back from box to box. We have also formatted many of the boxes allowing for only all CAPS or dates where appropriate.

*NOTE ON ATTACHING FILES:

When sending e-mails most application allow the user to ATTACH a file. Clicking attach will usually open a dialogue box asking you to browse for the file (you'll need to know where it is saved) and then select it for attachment. Once attached to the e-mail simply hit SEND.

END OF SEASON REPORT

Team Results : Overall Record _____ League Record _____ League Standing _____

Opponent	Home/Away	Date	Score (OHS/Oppt)	Opponent	Home/Away	Date	Score (OHS/Oppt)
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____
	H <input type="checkbox"/> A <input type="checkbox"/>		_____		H <input type="checkbox"/> A <input type="checkbox"/>		_____

Individual Honors

<p>All County _____</p> <p>_____</p> <p>_____</p> <p>All Conference _____</p> <p>_____</p> <p>_____</p> <p>All Division _____</p> <p>_____</p> <p>_____</p> <p>All County _____</p> <p>Honorable Mention _____</p> <p>_____</p> <p>Individual Scholar Athlete _____</p> <p>_____</p>	<p style="text-align: center;">*MVP</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">*Most Improved</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">*Player's Player</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">Other Award</p> <p>(fill in title of award and player's name) _____</p> <p>_____</p> <p style="text-align: center;">Captains</p> <p>_____</p> <p>_____</p> <p style="text-align: center;">Managers</p> <p>_____</p> <p>_____</p> <p>_____</p>
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Team Honors

<p>Qualified for Play-offs Yes <input type="checkbox"/> No <input type="checkbox"/></p>	<p>Team Average _____</p> <p>NYSPHSAA Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Scholar Athlete Team</p>
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OUFSD ATHLETIC INVENTORY

YEAR _____

SPORT _____

LEVEL _____

COACH _____

<u>ITEM</u>	<u># NEW</u>	<u># GOOD</u>	<u># POOR</u>	<u># LOST</u>	<u>TOTAL ON HAND</u>

I have received back all equipment issued to my team members for the sport season described above.
YES NO (if no, please complete Delinquent Equipment Form)

DELINQUENT EQUIPMENT FORM

Student Name _____

Team _____

Season _____

Home Phone _____

After repeated collection attempts including:

End of season collection meeting held on which the student did did not attend, and

Attempts to contact the home on:

Date _____ **Spoke with** _____ **Left message on machine**

Date _____ **Spoke with** _____ **Left message on machine**

The above student has not returned the following items:

Item Description	Cost based on most recent P.O. or Catalogue

Filled out and submitted by: _____ **Date:** _____