Personal Information

Name	
Address	
Home Phone	
Business Phone	Cell
E-Mail	

Application to Coach, Please list the team you are applying for and the position. HC = Head Coach, AC = Assistant Coach, M = Manager, TR = Trainer

	Team and Position
First choice	HC AC M TR
Second choice	

Certification

NCCP certification: List expiry date and level:	
PRS certification: List date attained:	
Trainer certification: List expiry date and level:	
Police record check: Submitted in pkg.	To be submitted at a later date

Experience – List in order, starting with the most recent assignment. List other sports last.

Season	Team/Organization/Level (eg: Atom/Centre Wellington/AA)	Role (Coach, Trainer, Manager)
2015-16		
2014-15		
2013-14		
2012-13		
2011-12		

Original Date: March 22, 2010 Revision Date: March 25, 2011

Coaching Goals: To be filled out by those who were not head coaches in 2016-17. Returning Applicants: Please provide an updated plan with respect to your goals, objectives, staff, and changes you would propose for the upcoming season. Short Term Goals (tryouts through first 2 months) Long Term Goals (November through playoffs) Coaching Philosophy: Describe your coaching style. List 3 coaching skill areas that you consider your strengths. 1. 2. 3. List 3 coaching skill areas that you wish to improve on. 1. 2.

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3.

**Feel free to attach any other information that you would like to share with the Coaches' Selection Committee.

Team Officials/Support Staff: Please list your proposed Coaching/support staff (optional)

	Name and phone number	Certification credentials
Trainer		
Manager:		
Assistant Coach:		
Assistant Coach:		

References: Please provide 3 references that we may contact. These can be professional, personal or a player's parent.

Name & position	Phone #

You may attach a hockey resume or any other relevant information to this form.

Coaching Agreements:

- 1. I hereby consent to the disclosure of this application for the purposes of the coach selection process.
- 2. I hereby acknowledge the authority of Hockey Canada, OHF, OMHA, and Centre Wellington Minor Hockey association and agree to carry out and abide by their constitutions, bylaws and rules and regulations.
- 3. I hereby acknowledge that I have read and understand the coaches role as outlined in the "Coaches Code of Conduct"
- 4. I understand that player development is a goal of this Association and I support this.
- 5. I hereby pledge to provide the best program I can for my players.
- 6. I hereby acknowledge that I am 16 years old or above.

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Name:	Date:	
Signature:		

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