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## Coach Application

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Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (Residence): \_\_\_\_\_ (Cell): \_\_\_\_\_

Email: \_\_\_\_\_

### **TEAM SELECTION**

First Choice: \_\_\_\_\_ Second Choice: \_\_\_\_\_

(Category i.e. Initiation, Novice, Atom, Peewee, Bantam, Midget and level i.e. House, A, AA, or AAA)

If these choices were not available, would you accept a different position?

Yes \_\_\_\_ No \_\_\_\_

### **NATIONAL COACHING CERTIFICATION** (Please fill out all applicable areas)

Initiation Program/Intro Coach (YES / NO) Year Attained: \_\_\_\_\_

Coach Level (YES / NO) Year Attained: \_\_\_\_\_

Intermediate Level/Development I (YES / NO) Year Attained: \_\_\_\_\_

Development II (YES / NO) Year Attained: \_\_\_\_\_

High Performance I (YES / NO) Year Attained: \_\_\_\_\_

High Performance II (YES / NO) Year Attained: \_\_\_\_\_

Safety/Trainer Program (YES / NO) Year Attained: \_\_\_\_\_

Speak Out Program (YES / NO) Year Attained: \_\_\_\_\_

Checking Skills (YES / NO) Year Attained: \_\_\_\_\_

other \_\_\_\_\_ (YES / NO) Year Attained: \_\_\_\_\_

Respect in Sport # \_\_\_\_\_ (YES / NO) Year Attained: \_\_\_\_\_

**COACHING RESUME**

Previous Years	Team/Association	Category	Position

1.) Are you interested in taking any upcoming courses?

Intro Coach, Coach Level, Development 1, Respect in Sport, Safety Program, etc.

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Please attach your personal resume, reflecting your coaching experiences and any other information, which is not detailed in this application.

2.) What is your coaching philosophy? (Attach sheet if necessary)

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3.) How would you handle discipline on the bench, dressing room, etc?

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4.) What would be your team goals and/or objectives for the year?

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5.) Have you ever been suspended as a coach? If so, please explain. (attach sheet if necessary)

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**REFERENCES:** (list three references i.e. player (12 & over), parents, and professional)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (res.): \_\_\_\_\_ (Bus): \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (res.): \_\_\_\_\_ (Bus): \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (res.): \_\_\_\_\_ (Bus): \_\_\_\_\_

**DECLARATION:**

\* I agree to follow the Bylaws, Regulations and Policy as set out by Wainwright Minor Hockey Association, Hockey Alberta and Hockey Canada.

\* I hereby authorize Wainwright Minor Hockey Association to conduct any investigation deemed necessary to verify my credentials, qualifications and character in order to meet their coaching requirements.

\* I agree the information on this application can be shared with the WMHA coach's selection committee.

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Completed applications can be mailed to:

**Wainwright Minor Hockey Association  
800 4th Ave  
Wainwright, Alberta  
T9W 1C3**

**\*All coaches must clear a Criminal Record Check\***