



COACHING APPLICATION

NAME: _____ DATE OF BIRTH: _____

ADDRESS: _____

POSTAL CODE: _____ PHONE #: _____

EMAIL: _____

HOCKEY CANADA LEVEL: _____ CERTIFICATION #: _____
(eg. Speak out, Development 1, Trainer)

AGE GROUP/TEAM YOU'RE APPLYING FOR _____
(eg. Minor Pee wee, Atom, Midget)

Will you have a child playing on this team? _____ (Yes/No)

If yes, Player's Name _____

If coaching now, present team and age group? _____

List any team officials (if any) and coaching level that will be assisting you as well as any related players

Assistant _____ Player's name _____

Assistant _____ Player's name _____

Trainer _____ Player's name _____

Manager _____ Player's name _____

Unfortunately, there is no guarantee that all applicants will be interviewed. Applications will be judged and in the opinion of the Coach Selection Committee, the best candidates will be afforded the opportunity to proceed to the interview process. Candidates will be notified of interview times and due to the large number of potential applicants you will be asked to make necessary arrangements to accommodate the schedule. Please note – only successful candidates will be notified once selection is finalized. All selections require SHA Board approval and a Police Criminal Record check.