

COACHING APPLICATION

MINOR HOCKE	Y	Please Print						
Desired Coaching Pos		☐ Assistant Coach						
Team you are applyin		ex. Bantam AA, Peewee AA, Novice)						
	(E	ex. Bantam AA, Peewee AA, Novice)						
If not selected for the	position applying for, would	d you be interested in coaching a diffe	erent team/capacity? Y	N				
	PER	RSONAL INFORMATION						
Name:								
Address:								
(Street	r/Box #)	(City/Town)	(City/Town) (Province) (Postal Cod					
Telephone:	(Residence)	(Cell)	(Work)					
F	(nesiderice)	(Cell)	(VVOIK)	(WOIK)				
E-mail:				_				
	PROFI	ESSIONAL DEVELOPMENT						
Education Backgroun	d: High School Diplo Technical School University/Colleg	Diploma Year:						
NCCP Level Attained:	 None (*If none, coach has until November 15 to obtain Intro to Coach or Coach Level) Intro to Coach (*Minimum requirement to coach Timbit and Initiation) Coach Level (*Minimum requirement to coach Novice and Older) Development 1 (*Minimum requirement to coach any AA team, Bantam AAA or Midget 15 team) Development 2 High Performance 1 (*Minimum requirement to coach Midget AAA team) 							
	Year obtained: Clinic Location:							
Additional training:	Peewee divisions or older)) bench staff have this course)							
Coaching Seminars/Sy	mposiums attended in addi	tion to NCCP:						
			Year: Year:					
			V					
Are you willing to tak	e additional Hockev Canada	training/certification programs?:	Y N					
	·	ING & HOCKEY EXPERIENCE						
	_	NO & HOCKET EXPENIENCE						
Highest Level Played:	☐ Minor Hockey☐ Junior Hockey☐ College/Professio	nal						
	Team:							

List your most recent hockey seasons coached (List most recent season first):								
<u>Season</u>	<u>Team Name</u>	Head <u>Coach</u>	Asst. <u>Coach</u>	Age Division	<u>Category</u>			
Ex) 2013-14	Medicine Hat Venom	_ 🗆	$\overline{\checkmark}$	Peewee	_AA			
		_ 🗆			_			
		_ 🗆			_			
		_ 🗆			_			
		_ 🗆			_			
List other coaching experience (any sport):								
ADDITIONAL INFORMATION								
Please indicate your agreement to do a criminal record check and child welfare check by initialling here								
Please provide	names of assistant coaches and/or	team manage	r if avail	able:				
COACHING PHILOSOPHY								
On a separate	page, please answer in detail the fol	lowing questi	ons:					
1. Describe your ideal coaching environment.								
2. Indicate what benefits you feel you will gain from participation as a coach within the Medicine Hat Minor Hockey Association.								

- 3. What are you going to contribute to Medicine Hat Minor Hockey as a coach, and how are you going to achieve that?
- 4. Describe your short term (2-3 years) and long term coaching goals.

Please feel free to attach additional coaching resume/information or provide additional details you feel are relevant or appropriate.

SUBMIT APPLICATION TO MEDICINE HAT MINOR HOCKEY:

Email: info@mhmha.ca

Mail or Drop off to: Medicine Hat Minor Hockey

#4, 46 Carry Drive SE Medicine Hat , Alberta

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