Battlefords Minor Hockey Association

**Coaching Application Form**

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

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

Phone (hm):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (cell):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Team you are applying to coach:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Coach Information**

Indicate the highest level of Coaching Certification attained:

Level (Coach, Intermediate, Advance)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date completed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check any of the following courses that have been completed:

o Safety

o Coach Respect in Sport

o Checking Skills

o Development I

o Development II

Will you participate in Coach Development Sessions? \_\_\_\_\_yes \_\_\_\_\_\_\_no

Will you be willing to work with a Coach Mentor \_\_\_\_\_yes \_\_\_\_\_\_\_no

Briefly outline your past Coaching/Hockey Experiences:

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**\*NOTE: All Coaches must have a Current Criminal Record Check** **prior to season start\***