



# Battlefords Minor Hockey Association



## Coaching Application Form

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

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

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

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

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

### **Coach Information**

How many years have you been coaching hockey? \_\_\_\_\_

Highest level of Coaching: (Indicate Age Division/Tier as Head Coach or Ass't Coach and what year): \_\_\_\_\_

Please mark with an X the following courses that have been completed (Will also be confirmed in HCR):

- |                                |                                  |
|--------------------------------|----------------------------------|
| HU-Planning a Safe Return_____ | Checking 1_____                  |
| HU-Safety_____                 | Goaltending 1_____               |
| Respect in Sport_____          | Development 1_____               |
| Coach 1 Intro_____             | High Performance 1_____          |
| Coach 2 Level_____             | Any other Specialty courses_____ |

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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