**PERSONAL INFORMATION**

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

**E-Mail Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

**Telephone**: (**H**)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (**W**)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (**C**)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of birth** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Employer**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Occupation**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| **PREFERRED COACHING ASSIGNMENT** |

Initiation\_\_\_ Atom\_\_\_ Peewee\_\_\_ Bantam\_\_\_ Midget\_\_\_ House\_\_\_ Rep\_\_\_

Position Wanted: Head Coach\_\_\_\_ Assistant Coach\_\_\_\_ Parent Helper\_\_\_\_ Manager\_\_\_\_ Trainor\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **COURSE** | **DATE** | **LOCATION** |
| **Respect in Sports** |  |  |
| **HCSP (Hockey Canada Safety Program)** |  |  |
| **Coach 1** |  |  |
| **Coach 2 or Equivalent** |  |  |
| **Intermediate or Equivalen`t** |  |  |
| **Advanced Level I, II, or Dev I** |  |  |
| **NCCP (National Coaching Certification Program)** |  |  |
| **Other** |  |  |

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| **HOCKEY COACHING EXPERIENCE (list in order starting with most recent)** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **YEAR** | **ASSOCIATION** | **TEAM NAME** | **POSITION HC/Asst.** | **LEVEL/DIVISION or AGE GROUP** |
|  |  |  |  |  |
|  |  |  |  |  |

**OTHER SPORTS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **YEAR** | **ASSOCIATION** | **TEAM NAME** | **POSITION HC/Asst.** | **DIVISION or AGE GROUP** |
|  |  |  |  |  |

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| **PLAYING EXPERIENCE (list in order starting with most recent)** |

|  |  |  |  |
| --- | --- | --- | --- |
| **YEAR** | **ASSOCIATION** | **TEAM NAME** | **LEVEL/DIVISION/AGE** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

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| **COACHING REFERENCES** |

|  |  |  |
| --- | --- | --- |
| **NAME** | **PHONE** | **POSITION** |
|  |  |  |
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| **UNDERTAKINGS** |

1. I hereby consent to the disclosure of the above information.

2. I hereby acknowledge the authority of the Hockey Canada, BCHA, the District and local Minor Hockey Association and agree to carry out and abide by their constitutions, bylaws, rules and regulations.

3. I hereby agree to familiarize myself with the National Coaching Certification Program (NCCP) requirements for coaching minor hockey and ensure that I maintain the required level of certification.

4. By way of this application, I agree to provide a criminal record check with the Authority having jurisdiction. (Only required if not on record with B.C.H.A)

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***PLEASE NOTE* – All applications must now include a copy (do not attach originals) of your Criminal Record Check (CRC), current Respect in Sport (RIS), Concussion Awareness Training Tool (CATT). Incomplete applications will not be accepted. All basic certification can be found on the BC Hockey Website under “Clinics.”Attached: CRC\_\_\_\_\_\_ RIS\_\_\_\_\_\_\_ CATT\_\_\_\_\_\_**

**Please Email your application to: headcoach@crestonvalleyminorhockey.com**