



DCMHA

Recreational Coach Application

Application will not be considered if the mandatory fields are not completed.

Please fill out application by typing or legible print.

Section 1: Contact Information

Name			
Address			
City		Phone #	
Postal Code		Cell #	
Email		Work #	

Section 2: Team Applying For

1st	
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2nd	
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If you have a child trying out for a Rep team and your ability to take a coaching position is dependent on that please indicate so.

Yes No

Have you ever been disciplined, dismissed or suspended by an Amateur Sports Organization?

Yes No Discussion Required

Section 3: Coaching History

Year Team

* Position held & comments

Year Team

* Position held & comments

Year Team

* Position held & comments

Year Team

* Position held & comments

Year Team

* Position held & comments

Year Team

* Position held & comments

Section 4: Coaching Philosophy - (All fields are mandatory)

1- Why do you want to coach the team you have applied for as your first choice? Please be as detailed as possible in your response.

2- Describe any knowledge or skills you can pass on to the players.

3- In your opinion, what is a successful season?

4- How would you handle a parent that is having a negative effect on the team? Please explain what you would consider a negative effect?

5- Your philosophy on equal ice time for players on your team.

6- Your philosophy of Player disrespect towards the coaching staff.

7- How would you handle parent complaints or issues with parents?

8- If selected what benefits will your players get from looking back and having had you as their coach in Minor Hockey.

Terms and Conditions for the DCMHA Coaching Application

By submitting this Application to DCMHA, you are indicating that you have read, understood, and will agree to all the terms and conditions on behalf of your Staff.

* I agree, to abide by all of the DCMHA rules, bylaws, policies, philosophies, and guidelines.

Yes I agree

* I further understand and agree that the Head Coach bears the ultimate responsibility for any and all Team Staff conduct or lack of performance in their duties. It is also understood that all signing parties are subject to discipline or suspension at the DCMHA Boards discretion.

Yes I agree

* I agree, if short listed to attend a formal interview with the selection committee.

Yes I agree

* I agree, if selected as the Head Coach that DCMHA will have the right to approve or disapprove all team staff including Assistant Coaches and Managers

Yes I agree

* I agree, if selected for an interview that the selection committee can contact any previous organization in which I have served as a coach or team staff for a reference of past history.

Yes I agree

Please provide the name and phone number of 2 hockey references that we may contact.

Reference #1		Reference #2	
Name		Name	
Phone #		Phone #	

Signature of Applicant	
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PLEASE COMPLETE YOUR APPLICATION FORM AND EMAIL TO DCMHA.

Candidates will be contacted for an interview by coach selection committee upon submission of your application.

Email: dcmha@pris.ca

**** All Coach Applications must be filled out completely**