



## DCMHA

### Rep Coach Application

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

Final selections are to be decided at the discretion of the DCMHA Coach Selection Committee.

Please fill out application by typing or legible print.

#### Section 1: Contact Information

<b>Name</b>			
<b>Address</b>			
<b>City</b>		<b>Phone #</b>	
<b>Postal Code</b>		<b>Cell #</b>	
<b>Email</b>		<b>Work #</b>	

#### Section 2: Team Choice

<b>Atom DEV</b>	<input type="checkbox"/>	1 <sup>st</sup>	
		2 <sup>nd</sup>	
<b>Pee-Wee Rep</b>	<input type="checkbox"/>	<b>Would you consider an Assistant Coach Position?</b>	
<b>Bantam Rep</b>	<input type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Midget Rep</b>	<input type="checkbox"/>	<b>Have you ever been disciplined, dismissed or suspended by an Amateur Sports Organization?</b>	
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> 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

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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 #	

<b>Signature of Applicant</b>	
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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](mailto:dcmha@pris.ca)**

**\*\* All Coach Applications must be filled out completely and submitted to DCMHA by no later than March 31<sup>st</sup>, 2017\*\***