NATIONAL COACHING CERTIFICATION PROGRAM
DEVELOPMENT 1 – EVALUATION PROCEDURES

EVALUATION PROCEDURES - *COACH CANDIDATE*

PART A: COACH CANDIDATE REQUEST FOR EVALUATION FORM

IMPORTANT NOTICE to D1 Trained Coaches
Please reach out to your association D1 Evaluator to arrange your D1 Evaluation.
If your association does not have a D1 Evaluator, and you are not able to find a D1 Evaluator on your own, please complete the OWHA Application to request a D1 Evaluation and email it to the OWHA. We do not require the application form to be completed and submitted if you have found a D1 Evaluator for your Evaluation.
Please email coach@owha.on.ca if you have any questions.

PLEASE COMPLETE THIS FORM ALONG WITH PART B & C: THE COACH DEVELOPMENT PLAN AND SEND IT TO

**BRANCH - ONTARIO WOMEN'S HOCKEY PROGRAM
DIRECTOR: COACH@OWHA.ON.CA**

Name: _____ Email: _____

Mailing Address *(full address)*: _____

Contact Phone: _____ Alt. Phone: _____

NCCP – CC#: _____ HCR #: _____

Coaches must have completed the following components prior the Evaluation Process.

Your D1 Evaluator will provide you with instructions on where to send these components prior to your on-ice D1 Evaluation. Failure to provide proof of completion of the components below will result in you not receiving your D1 Certified Status.

Making Ethical Decision (MEDs) specifically for **Hockey**
(Multi-Sport MEDs will not be accepted for this component)

Completed D1 Coach Workbook

Completed Emergency Action Plan (EAP)

Copy of the Practice Plan to be executed on ice.

For Office Use Only:

Date Received: _____

□ Branch Contacted – staff person: _____
□ Evaluator Contacted
□ Documentation sent to evaluator

Evaluator Assigned: _____

Email: _____

Date: _____

PART B: COACH DEVELOPMENT PLAN

Recent Coaching Experiences:

Yearly:	Team:	Organization/Level:	Coaching Role:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Coaching Aspirations (What's next?)

Short term goal(s):

Long term goal(s):

List 3 coaching skill areas you consider strengths:

1.

2.

3.

List 3 coaching skill areas you wish to improve:

1.

2.

3.

List the steps necessary to achieve your goal(s):

Signed: _____ **Date:** _____

Part C: Schedules

Attach a full schedule of all practices. Based on the times submitted, an evaluator will contact you and set up a time that works for the both of you.