



Macdonald Ringette Coach Application

Season: _____

A Coach Application **B Coach Application**

Applicant Information:

Name: _____

DOB: _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Occupation: _____

TEAM SELECTION:

1st Choice: _____

Do you have a child playing ringette at this level? Yes No

Name: _____ DOB: _____

Child's Last level of play: _____

Position Played: Forward: Defense: Goalie:

In your assessment, is the child capable of playing at this level? Yes No
 In what portion of the team do you feel your child will rate? Upper Middle Lower

2nd Choice: _____

Do you have a child playing ringette at this level? Yes No

Child's Last level of play: _____

Position Played: Forward: Defense: Goalie:

In your assessment, is the child capable of playing at this level? Yes No
 In what portion of the team do you feel your child will rate? Upper Middle Lower

Coaching Experience: (list in order, start with most recent)

Year	Association & Team Name	Age Group	Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Philosophy: (Briefly describe your coaching philosophy)

(A Coach Applications only): Describe your Season Plan and provide an example of a lesson plan for a practice. List how you would develop the team from the beginning of the season to the end. Include what aspects you would look for in overall player development. (If more space is needed please add an attachment)

Certifications: (from the Ringette Manitoba database)

Coach Level: _____

Year: _____

Respect in Sport: Yes No

Year: _____

MED(in class) Yes No

Year: _____

MED (online) Yes No

Year: _____

Other Courses Attained:

Year: _____

Year: _____

Year: _____

Year: _____

Year: _____

What is the highest level of ringette that you have played? _____

Playing Experience *(start with most recent):*

Year	Association Name	Team Name	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Ringette Related References:

Name: _____ Phone: _____ Cell Phone: _____

Name: _____ Phone: _____ Cell Phone: _____

Name: _____ Phone: _____ Cell Phone: _____

Child Abuse Registry: *All successful coaching applicants will be subject to a child abuse registry check*

Signature confirms that all information provided as part of this application is true and accurate

Applicant Signature_____
Date**Submit completed application to:**Director of Coaching Development
coachdev.macringette@gmail.com