

COACHING APPLICATION

Last Name:	me:				First Name:				
Address:									
Town/City & Postal Code:									
Home #:			- .						
Work #:				_ "					
COACHING POSITION FOR WHICH YOU ARE APPLYING (Check Selections):									
POSITION:	POSITION:			nt Coach	INDICATED SEASON:				
DIVISION:	Active art	☐ U10 - Step 1	☐ U10 – Step 2 or 3	□ U12	□ U14	□ U16	□ U19	9 🗖 18+	
LEVEL: (U12 or Higher)	A		□В		□с				
Do you have a child registered with SGRA									
NCCP Number #: Name on Certification:									
NCCP Competency Based Education & Training (New)					Course Complete:				
Community Sport Initiation (CSI)						☐ Trained ☐ Certified			
Competition Introduction Ringette (CI-1)					☐ Trained		☐ Certified		
Competition Introduction Multi-Sport Course – Part B (CI-2)						☐ Trained	ł	☐ Certified	
Competition Introduction Graduation (CD)								☐ Certified	
Ethics Module (MED)								☐ Certified	
RINGETTE COACHING EXPERIENCE									
Season (Ex: 2014/2015)		Association	1	Coachin	g Position	Divisi	ion	Level	
								+	
								+	
1	+			-					

OTHER COACHING EXPERIENCE or COACHING RELATED COURSES:							
Coaching Devel	nterested/willing in to opment sessions? (Ex		☐ YES	□ NO	☐ Maybe		
skating/Nutrition/etc.) Would you be willing to become a Coach Mentor?			☐ YES	□ NO	□ N/A		
Season (Ex: 2014/2015)	Association or Club	Coaching Position	Course	Level	Result (Course)		
• OTHE							
REFERENCES (A	lame, Address and P	hone Numbers of t	wo players y	you have coac	hed):		
Reference 1:			Reference 2:				
Name:			Name:				
Phone #:			Phone #:				
Email:			Email:				
Name, Phone Number and/or email of parents of two players you have coached (Must be different from two players used as reference):							
Contact 1:			Contact 2	:			
Name:			Name:				
Phone #:			Phone #:				
Email:			Email:				

COACHING PHILOSOPHY

DIVISION:	POSTION:		TEAM:		
APPROVED TO COACH	FOR THE:	SEASON	☐ YES	□ NO	
OFFICE USE ONLY:					
SIGNATURE:			DATE:		<u>/2015</u>
		aching Director at <u>coacl</u>			
PLEASE RETURN BOTH	I SGRA COACHING AP	PLICATION FORM & RI	NGETTF ALBFR	TA SCRFFNING	DISCLOSURF
		s deadline will be poste o participate in any on-			•
		oleted at no charge. The			
letter to the RCMP fro	m our association. Yo	u must take this and ta	ke picture ID to	the RCMP deta	chment in
		or assistant coach you versions to be completed every			
Alberta Screening Disc	closure Form and the	Ringette Alberta Code	of Conduct for	Coaches Form.	If you are
		per Ringette Alberta Po			
DCMD CDIMINIAL DECO	OPD CHECK and PING	ETTE ALBERTA SCREEN	ING DISCLOSIII	PE/CODE OE CO	NDLICT:
1					
How will you handle a	a parent concern/com	plaint on your team?			
you use or would like		•	, juinor coucife	s and any specie	ii programs
•	explanation of your con, player communicati	on, leadership, officials			