



COACHING APPLICATION FORM

SECTION 1. CONTACT INFORMATION

Name of Applicant: _____
(Given Name) (Middle Name) (Surname)

Address: _____

Postal Code: _____ Birth Date: _____

Telephone: (Home) _____ (Work) _____

E-mail Address: _____

SECTION 2. TEAM APPLICATION

Preferred Coaching Assignment: Head Coach ☐ Assistant Coach ☐

- Tyke ☐
- Novice ☐
- Peewee ☐
- Bantam ☐
- Bantam Girls ☐
- Midget ☐
- Junior Girls ☐
- Junior Boys Tier III ☐
- Junior Boys Tier II ☐

Would you be willing to coach a team that you did NOT apply for? Yes ☐ No ☐

If so, please indicate which team(s): _____

Are you certified for the level for which you are applying? Yes ☐ or No ☐

If you are not certified at the required level, are you available to take a weekend course(s) to attain the required level? Yes ☐ or No ☐

SECTION 3. EXPERIENCE AND QUALIFICATIONS

What is your National Coaching Certification Program (NCCP) Coach Level?

Year Obtained: _____ Certification Number: _____

Lacrosse Coaching Experience (list in order, starting with the most recent).

YEAR	ASSOCIATION	AGE GROUP	POSITION

REFERENCES

NAME	HOME NUMBER	OTHER NUMBER

Please submit any references you would like considered

SECTION 4. COACHING PHILOSOPHY

What is your coaching philosophy?

What, in your opinion, is a successful season?

What is your personal opinion on the subject of equal floor time?

How do you discipline players in the following scenarios?

1. Disrespect towards the coaching staff:

2. Disrespect towards fellow team members:

3. Habitual lateness or absence from practice(s):

How do you intend to convey team rules to the parents?

- i. In writing ☐
- ii. Parent meeting(s) through team manager ☐
- iii. Tell the players verbally ☐

SECTION 5. COACHING EDUCATION

Would you be willing to attend coaching development clinics put forth by the Strathmore Lacrosse Coaching Development Committee? Yes ☐ or No ☐

If available would you follow a Strathmore Lacrosse Season Plan based on the age group and skill level?

Yes ☐ or No ☐

Undertakings:

1. I hereby consent to the disclosure of the above information.
2. I hereby acknowledge the authority of the CLA, ALA, the Calgary District Lacrosse Association and Strathmore Lacrosse Club and agree to carry out and abide by their constitutions, bylaws, rules and regulations.
3. I hereby agree to familiarize myself with the National Coaching Certification Program (NCCP) requirements for coaching minor lacrosse and ensure that I maintain the required level of certification.
4. I hereby agree to complete a Child Welfare Check in my full name to be reviewed by the Canadian Government and the Strathmore Lacrosse Club (President & Coach/Player Director) for final approval before interacting with any minor registered under the Strathmore Lacrosse Club
5. Attached is a copy of the Coaching Certification Record passport.

Signature: _____ Date: _____

Print Name: _____

Please Mail of E-mail the completed for m to: coaching@strathmorelacrosse.com

Attention: Coaching Director
Strathmore Lacrosse club
Box 2479
Strathmore, Alberta
T1P 1K3