

TriPort Team Head Coach Selection Application

Name of Coach: _____

Date of birth: _____ / _____ / _____ / HCR #: _____
DD MM YYYY

Address: _____

City: _____ Province: _____ Postal Code: _____

Phone (Residence): _____ Phone (Cell): _____

Email: _____

Team Selection

Please indicate by prioritizing the club and level in which you would like to coach.

	U7	U9	U11	U13	U15	U18
Port Hardy Minor Hockey						
Port McNeil Minor Hockey						
TriPort Wild (Female Program)	N/A	N/A				
North Island Eagles	N/A	N/A				

If a coaching position were not available in the age group of your choice, would you be willing to coach in another division or accept a different position (manager, assistant coach, executive)?

Yes No

BC Hockey Coaching Certification (please tick all completed certifications)

HU – Online Coach 1/Coach 2 Year Attained: _____

Coach 1 – Intro to Coach Year Attained: _____

Coach 2 – Coach Level or Year Attained: _____

Instructional Stream - Checking Year Attained: _____

HU – ONLINE Checking Year Attained: _____



- Development 1 or Year Attained: _____
- Development 2 Year Attained: _____
- High Performance 1 Year Attained: _____
- High Performance 2 Year Attained: _____
- Instructional Stream Specialty Clinics
 - Goalie Year Attained: _____
 - Skating Year Attained: _____
 - Skills Year Attained: _____
- CATT Year Attained: _____
- Respect in Sport – Activity Leader Year Attained: _____
- Criminal Record Check Year Attained: _____

Coaching Experience

	Place a ✓ for every level you have coached	# of Seasons coached at each level	Calendar years coached at each level (ie: 05/06)
U7			
U9			
U11 Recreation			
U11 Competitive			
U13 Recreation			
U13 Competitive			
U15 Recreation			
U15 Competitive			
U18 Recreation			
U18 Competitive			
Junior			

List the 5 most recent seasons, starting with the last team coached:

Year	Team/Association	Division	Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



Do you have a child in any of the TriPort Minor Hockey Clubs?

Yes No

If applying for rep, and your child is trying out, will you still coach if an independent committee does not assess your child to make the team?

Yes No

Are you completely certified for the level for which you are applying?

Yes No

If you are not certified, do you agree to attain the required certification at the earliest possible date?

Yes No

Have you ever been suspended/disciplined as a coach? If "Yes" Please explain

Yes No

If we asked the players on your last team these questions, what would they say?

A) what was the best thing about your coaching?

B) what was one thing they didn't like about your coaching?

/5

Over the past decade Hockey has really started to change from the "Old school" hockey days to becoming more inclusive and focusing on development and fair play of all players. What is your opinion on these changes? And what is your perspective on Fair play?

/5



Why do you want to coach this particular team?

/5

Coaching Resume

Please attach any other information which is not detailed in this application (i.e., employment, playing experiences, other interests, etc...). Please provide detailed information on all members of your intended coaching staff. Any additional information pertaining to the following would also be appreciated.

Character References (Please list three character references i.e. players 12 years and over, parents, professional).

Name: _____
Phone (Residence): _____ Phone (Cell): _____
Email: _____

Name: _____
Phone (Residence): _____ Phone (Cell): _____
Email: _____

Name: _____
Phone (Residence): _____ Phone (Cell): _____
Email: _____

Date: _____ Signature: _____

*****Please note that all volunteers applying for a Head coach position will also be required to do an in-person interview with a Coach selection committee.***