



South Okanagan Minor Hockey Rep Coach Application

Personal Information

Name: _____

(Given Name, Middle Name, Surname)

Home Address: _____ Postal Code: _____

Mailing Address: _____

Place of Birth: _____ Date of Birth: _____

Home Phone Number: _____ Work Phone Number: _____

Cell Phone Number: _____

E-Mail Address: _____

Employer: _____ Occupation: _____

Preferred Coaching Assignment (Please circle your choice)

Atom Development Pee Wee Rep Bantam Rep Midget Rep

Certifications / Trainings

NCCP (National Coaching Certification Program)

(Please attach Photocopies of your coaching certifications)

(Please list year completed and location)

Coach 2 (Old Hybrid) _____

Dev 1. _____

Checking Certification _____

Respect in Sport _____

Other Coaching Courses or Training Activities

Coaching Experience

Hockey Coaching Experience

(list in order, starting with most recent year coached, association, team name, age group, and your position)

Other Sports Coaching Experience

(Please list year, sport, association, and age group)

Playing Experience

(please list in order, starting with most recent, year, association, team name and age group)

Coaching Philosophy

Coaching References

	Name	Address	Phone	Position
1				
2				
3				
4				

Undertakings

1. I hereby consent to the disclosure of the above information.
2. I hereby acknowledge the authority of the CHA, BCAHA, The District and Local Minor Hockey Association and agree to carry out and abide by their constitutions, bylaws, rules and regulations.
3. I hereby acknowledge that I have read and understand the coach's role outlined in the "Coaches Code of Conduct" attached to and forming part of this Coaching Application Form.
4. I hereby agree to familiarize myself with the National Coaching Certification Program (NCCP) Requirements for coaching minor hockey and ensure that I maintain the required level of certification.
5. By way of this application, I give permission to the South Okanagan Minor Hockey Association to pursue a criminal record search on myself.

Signature: _____

Date: