



2017-2018

		Personal Information
Name:		D.O.B:
Address:		
City:	Province:	Postal Code:
Cell Number:	Email:	

			COACHING C	ERTIFICATION
Current NCCP Coach Level:	Developme	ent 1	Coach 2- Coach L	evel
	Trained	Certified		
Have you completed the Speak Out! (PRS) or Respect in Sport – Activity Leader (RIS) program?			Yes	No
Do you have a Trainers Certification?			Yes	No
Have you attended any training course related to Coaching?*			Yes	No
Have you completed a Police Check in the last 3 years?		Yes	No	
*If you have answered yes, please provide details.				

		COACHING EXPERIENCE
Please provide details of pre	vious coaching positions.	
Year:	Team:	
Position:		
Remarks:		
Year:	Team:	
Position:		
Remarks:		
Year:	Team:	
Position:		
Remarks:		
Year:	Team:	
Position:		
Remarks:		

January 12, 2017





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TEAM APPLICATION					
I wish to apply to Coach the following team (note order of preference):					
Division	AA	AE	Division	AA	AE
Novice			Minor Bantam		
Minor Atom			Bantam		
Atom			Minor Midget		
Minor Peewee			Midget		
Peewee			Juvenile		
Do you have a child trying out for the team you are applying for: Yes No				No	
If so, please rate their hockey skills: Below Average Average Above Average					verage
Would you be wil	ling to coach a t	team for which yo	ou did not apply?	Yes	No
If so, please indicate	ate which team	(s):			
Do you have a pro		g Staff:			
Name o	f Staff	Po	sition	Qualifi	cations
					REFERENCES
Name		Home Phone	Em	ail Address	
Note: If you have	never coached	with KMHA please p	provide reference int	formation	
Note: If you have	never coached	with KMHA please _l	provide reference int	formation	
Note: If you have	never coached		provide reference int		PHILOSOPHY
·		(USE ADDITION	IAL PAGES IF NECESSARY) COACHING I	PHILOSOPHY
·		(USE ADDITION) COACHING I	PHILOSOPHY
·		(USE ADDITION	IAL PAGES IF NECESSARY) COACHING I	PHILOSOPHY
·		(USE ADDITION	IAL PAGES IF NECESSARY) COACHING I	PHILOSOPHY
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1. Describe y	our coaching p	(USE ADDITION	team you applied) COACHING I	PHILOSOPHY
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3.	What in your opinion is a successful season?
4.	Why did you select this age group to coach?
5.	Playing Experience: Please provide information about your playing experience and how it will contribute to coaching?
6.	On average, how many hours per week do you typically undertake for the following coaching activities? (Please enter hours in the boxes)
Coach	Preparation (i.e. Practice Plans / Game Strategy)
Coach	Delivery (i.e. Presenting drills to team)
Coach	Education (i.e. Hockey Canada website)
7.	What do you consider your "coaching" weakness/challenge and what will you do to overcome this?
8.	What Development clinics would you like to see or participate in throughout the season?
9.	What is your opinion on the subject of equal ice time?





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How would you discipline players in the following scenarios?				
Disrespect toward the coaching staff or fellow team members.				
2. Habitual tardiness or absence for practices or team events.				
How would you manage parent	al issues and concerns (i.e. ice tin	ne, disc	ipline)?	
How do you intend to commun	icate team rules with parents?			
In writing Parent Meetin	g(s) Through Team Manager	Verk	oal instructions t	to the Players
			ENERAL INFO	
Are you familiar with the KMHA Constitution, Bylaws and Policies? Yes No				
Are you familiar with KMHA Abuse and Harassment Policy? Yes No				
		Te	RMS AND CO	ONDITIONS
I/we agree to ahide by all KMH.	A Manual of Operations, Constitu			
1 ' -	nderstand and agree that the Hea		_	
<u> </u>	conduct or lack of performance o			
that all signing parties are subject to discipline or suspension at the discretion of the KMHA's Executive				
I/we agree to have a police crin as team staff.	ninal check completed within 7 da	ays of n	otification being	g appointed
I/we agree to all terms and con	ditions.			
Name	Position		Signature	e
Thank you for your intere	est in Coaching and supporting K	ent Mii	nor Hockey Asso	ciation





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I authorize the KMHA to collect personal information appropriate to the position applied and verify the references for KMHA internal use only.

Signature:	Date:

I agree to the terms and conditions stated above

Please submit Coaching Application by February 26th, 2017

to: Jason Bright, VP of Travel
Kent Minor Hockey Association
vptravel@kentminorhockey.com
PO Box 585 Chatham, Ontario N7M 5K6

All applications will be reviewed and on the recommendation of the Coach's Selection Committee, candidates will proceed to the interview process. Selected candidates will be notified of interview times. Due to the expected number of potential applicants, you may be asked to make the necessary arrangements to accommodate the interview schedule

Please note only the successful candidates will be notified once the selection process is finalized.

The success of the KMHA is attributed to its many dedicated volunteers. The Association appreciates your consideration in applying to be a Coach with Kent Minor Hockey.

At the coaching interview, you may be asked to submit a copy of a 60 minute practice plan. Please come with a plan prepared.