



Prince Rupert Minor Hockey Association

Coach Application Form

~~2007/2008 Season~~

PLEASE PRINT

Name: _____
(first name) (middle name) (last name)

Address: _____

City: _____ Postal Code: _____

Phone: Home: _____ Work: _____

Cell: _____ Fax: _____

email address: _____

Employer: _____ Occupation: _____

Employer's Address: _____ Phone: _____

Coaching Assignment Requested - (please indicate your 1st and 2nd choices)

Initiation A	
Initiation B	
Novice	
Atom	
Atom Developmental	
PeeWee House	
PeeWee Rep	
Bantam House	
Bantam Rep	
Midget House	
Midget Rep	

Certification/Training

	Year Completed	Location
Intro to coaching (initiation)		
Coach stream (coach level)		
Dev. 1 (intermediate)		
Dev. 2		
High performance		
Speak Out		
Checking Clinic		

Coaching Association of Canada Passport # _____
(Please attach copies of your coaching certification)

Other Coaching Courses or Training

Hockey Coaching Experience

(List in order, starting with most recent)

Year	Association and Team Name	Age Group	Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other Sports

(List in order, starting with most recent)

Year	Association and Team Name	Age Group	Position
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Playing Experience (start with most recent)

Year	Association and Team Name	Position	Age
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Briefly describe your coaching philosophy:

Do you have a child registered with Prince Rupert
Minor Hockey Association?

Yes No

If a coaching position were not available in the age group of
your choice, would you be willing to coach in another division
or help out with skill clinics?

Yes No

If yes, which division? _____

Do you feel your child will make the team for which you are applying?

Yes No

Will you coach the team if your child is does not make the team?

Yes No

Are you certified at the required level, are you for which you are applying?

Yes No

If you are not certified at the required level, are you available to take a weekend course to attain the required level?

Yes No

Coaching References:

Name: _____

Address: _____

Phone: _____ Email: _____

Association and Position: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Association and Position: _____

Name: _____

Address: _____

Phone: _____ Email: _____

Association and Position: _____

Undertaking

1. I hereby consent to disclosure of the above information.
2. I hereby acknowledge the authority of the CHA, BCAHA and the Prince Rupert Minor Hockey Association and agree to carry out and abide by their constitution, bylaws, rules and regulations.
3. I hereby acknowledge that I have read and understand the coach's role as 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 Prince Rupert Minor Hockey Association to conduct a criminal record search on myself.

Signature: _____ Date: _____

Please submit your application to: Head Coach
 Prince Rupert Minor Hockey Association
 PO Box 692, Prince Rupert, BC V8J 3P6

Or you may fax your application to: 250-627-4187

Deadline for receipt of application form is midnight: _____

NOTE: Please attach copies of your coaching certification.