

Powassan Minor Hockey Association

Box 141 Powassan, Ontario P0H 1Z0

Coaching Application Form 2019-20

| Applicant Information | | | | | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------|----------|-------------|------------|----------------|-------------|----------------|--|-----------------------------|--|
| Name | | | | | | | | | | |
| Address | ddress | | | | | | | | | |
| City / Town | | | | | Postal Code | | | | | |
| Home Phone | | | | | Cell Phone | | | | | |
| Email Address | | | | • | | | • | | | |
| Position and Team (s) Applied For (check all that apply): | | | | | | | | | | |
| Position Applied | ed for Head Co | | oach | Assistan | t Coach | | Trainer | | Manager | |
| Initiation (5-6) |) Novice (7-8) | | Atom (9-1 | 0) | Peewee (11-12) | | Bantam (13-14) | | Midget (15–17) | |
| House League | | | | | Rep Level | | | | | |
| I understand that if I am the successful candidate when applying to coach a competitive team and have a child trying out for that team my position may only be confirmed once the tryout process has selected my child as a player for the team. | | | | | | | | | | |
| Initial: | | | | | | | | | | |
| Certification a | and Ri | sk Manag | gement | | | | | | | |
| Do you have a Sector Check? | you have a current Criminal and Vulnerable ctor Check? | | | ble | Yes No | Date Obtain | ied | | | |
| Do you have Dev | u have Development 1 Coaching Certification | | | on · | Yes No | Date Obtain | ied | | | |
| Have you taken Respect in Sports-Leadership? | | | |)? | Yes No | Date Taken | ? | | | |
| I understand required coac volunteer dut Initials: | hing a | nd or be | nch staff c | ertificati | ions alon | g with Spea | | | ompleted the e to end my | |

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| HTCP Trainer Certification | | | Yes No | | piry Date? | | | Level | | | |
|---------------------------------------------------------|----------------|-------------|-------------|---|------------|--------|--|-----------------|--|--|--|
| NCCP | Yes No | Date Taken? | | | | Level? | | | | | |
| Initiation Prog | ıram (IP) | | Yes No Date | | te Taken? | | | | | | |
| Other Certifications? | | | | | | | | | | | |
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| Planned Upgrades for the season? | | | | | | | | | | | |
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| | | | | | | | | | | | |
| Experience | Experience Yea | | | r | | Team | | Notable Results | | | |
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| Please outline your coaching philosophy and objectives? | | | | | | | | | | | |
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| How do you deal with conflict? |
|-------------------------------------------------------------------------------------------|
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| For your last team what were the team and individual objectives you set? |
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| What is your attitude with respect to non hockey activities (ie – school sports, dryland |
| training, social events etc)? |
| turning, social events etc): |
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| Why are you the best person for the position you are applying for? |
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| What tournaments are you thinking of entering the team you are applying for should you be |
| chosen? |
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| By completing and returning this application form applicants hereby agree to abide |
| by and adhere to the rules, regulations, policies and guidelines of Hockey Canada, |
| Northern Ontario Hockey Association and Powassan Minor Hockey Association). |
| |
| Initials: |
| |
| Please return completed form electronically to |
| Shawn Esserty |
| President at president@powassanhawks.com |
| |
| Or |
| Frin Thompson |
| Erin Thompson |
| Secretary at secretary@powassanhawks.com |

Deadline for coaching applications is May 1st 2019 for Rep applications, Sept 4th, 2019 for House League applications