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**Powassan Minor Hockey Association**

Box 141

Powassan, Ontario

P0H 1Z0

**Coaching Application Form 2020-2021**

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| **Applicant Information** |
| Name |  |
| Address |  |
| City / Town |  | Postal Code |  |
| HomePhone |  | Cell Phone |  |
| EmailAddress |  |
| **Position and Team (s) Applied For** (check all that apply): |
| Position Applied for | Head Coach | Assistant Coach | Trainer | Manager |
| Initiation (5-6) | Novice (7-8) | Atom (9-10) | 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 and Risk Management** |
| Do you have a current Criminal and VulnerableSector Check? | Yes | Date Obtained |  |
| No |
| Do you have Development 1 Coaching Certification | Yes | Date Obtained |  |
| No |
| Have you taken Respect in Sports-Leadership? | Yes | Date Taken? |  |
| No |
| **I understand I must have a current Criminal and Vulnerable Sector check and have completed the required coaching and or bench staff certifications along with Speak Out or I will have to end my volunteer duties until I have completed these three items.**Initials:  |

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|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| HTCP Trainer Certification | Yes | Expiry Date? |  | Level |  |
| No |
| NCCP | Yes No | Date Taken? |  | Level? |  |
| Initiation Program (IP) | Yes No | Date Taken? |  |
| Other Certifications? |
| Planned Upgrades for the season? |
| **Experience** | **Year** | **Team** | **Notable Results** |
|  |  |  |  |
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|  |  |  |  |
| Please outline your coaching philosophy and objectives? |

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How do you deal with conflict?

For your last team what were the team and individual objectives you set?

What is your attitude with respect to non hockey activities (ie – school sports, dryland training, social events etc)?

Why are you the best person for the position you are applying for?

What tournaments are you thinking of entering the team you are applying for should you be chosen?

**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**

Nathan Stewart

President at president@powassanhawks.com

Or

Erin Thompson

Secretary at secretary@powassanhawks.com

**Deadline for coaching applications is TBD for Rep applications, TBD for** **House League applications**