

NORMAN REGIONAL MINOR HOCKEY ASSOCIATION

TEAM NORMAN 2018/ 2019

COACHING APPLICATION FORM

Female Midget AAA Regional team
(Female players born in 2001 / 2002 / 2003)

NAME _____

ADDRESS _____

CITY/TOWN _____

POSTAL CODE _____ TELEPHONE _____(RES.)

_____ (BUS.)

_____ (FAX) _____ (E-MAIL)

TEAM APPLIED FOR : Position _____

Positions Available-

Head Coach

Assistant Coach

Safety

Manager

PRESENT COACHING POSITION (If applicable)

TITLE _____
TEAM _____
CATEGORY _____
LEAGUE _____

NATIONAL COACHING CERTIFICATION PROGRAM

(Please fill out all areas that are applicable).

A. TECHNICAL/PRACTICAL CERTIFICATION

Coach Level (Level I)	_____	Year Attained	_____
Coach Level (Level II)	_____	Year Attained	_____
Development 1!	_____	Year Attained	_____
High Performance 1	_____	Year Attained	_____

B. THEORY

Level I	_____	Year Attained	_____
Level II	_____	Year Attained	_____
Level III	_____	Year Attained	_____

INDIVIDUAL COACHING AWARDS

Year	_____	Award	_____
Year	_____	Award	_____

IDENTIFY YOUR COACHING POSITION(S), TEAM(S) AND CATEGORY(S) THAT YOU HAVE BEEN INVOLVED WITH:

	POSITION	TEAM	CATEGORY
2016-17	_____	_____	_____
2015-16	_____	_____	_____
2014-15	_____	_____	_____

LIST YOUR CONTRIBUTIONS TO NORMAN / HOCKEY MANITOBA (i.e. volunteer Hockey Manitoba Hockey Camps, Norman Camps, NCCP instructor etc....)

2016-17	_____
2015-16	_____
2014-15	_____

REFERENCES

Please list three (3) references that would be familiar with your coaching style and over all coaching abilities.

- A. NAME _____
ADDRESS _____
CITY/TOWN _____ POSTAL CODE _____
TELEPHONE _____(RES.) _____(BUS.)
- B. NAME _____
ADDRESS _____
CITY/TOWN _____ POSTAL CODE _____
TELEPHONE _____(RES.) _____(BUS.)
- C. NAME _____
ADDRESS _____
CITY/TOWN _____ POSTAL CODE _____
TELEPHONE _____(RES.) _____(BUS.)

BACKGROUND CHECK

In accordance with the Hockey Canada Abuse and Harassment policies adopted by Hockey Manitoba, all provincial team coaches must be subject to a police check.

I agree that if I am considered for any coaching position, I would complete a police background check (at Norman Minor Hockey expense) If required.

Applicants Signature

APPLICATION DEADLINE IS Nov 1, 2017

All applications must be completed in full and should be directed to:
For more Information on these teams, coaching positions or application forms please contact;

Norman Regional Minor Hockey Association
Ron LaRocque Fax 204-623-6250
Email ron.laricque@ckpi.com