

## Grand Falls-Windsor Minor Hockey Rep Team Coaching Application

Name:			
Address:			
Postal Code:		Telephone #:	
Date of Birth:	Month	Day	Year
Email Address:			

Please indicate the Position requested:

- Head Coach
- Assistant Coach
- Trainer
- Manager

Please indicate the Division requested:

- U11
- U13
- U15
- U18
- Other \_\_\_\_\_

Hockey Canada Coaching Levels:

- Respect in Sport for Activity Leaders
- Hockey University Online Course
- Coach Level 1
- Making Ethical Decisions
- Coach Level 2
- Development 1 Certified
- Other \_\_\_\_\_

**Please state experience (Team/Association/Position) including House League:**

**1.**

**2.**

**3.**

**4.**

**Have you ever been discharged and/or disciplined from a position of Coach or Trainer? Please explain.**

**Why are you volunteering for this position?**

**References (Please do not include any relatives):**

<b>1.</b>	<b>Name:</b>	<b>Phone #:</b>
<b>2.</b>	<b>Name:</b>	<b>Phone #:</b>

**Applicant Signature:**

**Date:**