



Port Dover Minor Hockey Association Coach's Application

For the 2017 – 2018 Hockey Season

1. Complete and return application
2. Interview with coaches' selection committee (as required)
3. Volunteer clearance check by local policing authority (Mandatory)

****ALL APPLICATIONS MUST BE RECEIVED BEFORE 8:00pm, Sunday, June 25 / 2017 ****

Section 1: Contact Information

Name: _____

Address: _____

City: _____

Postal Code: _____

Home Phone: _____

Business Phone: _____

Email: _____

Cell phone: _____

Section 2: Team Application

I wish to apply as Head Coach for the following team(s). *(Please check appropriate box or boxes.)* If you check multiple boxes please clearly rank your choices in order.

Rep Novice ____ Atom ____ Peewee ____ Bantam ____ Midget ____

Local League Novice ____ Atom ____ Peewee ____ Bantam ____ Midget ____

Section 3: Experience/Qualifications

Please provide details of prior positions held:

Year: _____ Association: _____

Position held and remarks:

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Position held and remarks:

Coaching Certification Requirements are as follows:

All levels require Speak Out or Respect in Sport Course, and a valid police criminal record vulnerable sector check.

IP, Tyke - CHIP required

Novice, Atom rep - Coach Stream or higher, LL- CHIP or Coach Stream or higher

Peewee, Bantam and Midget rep - Coach Development 1 or higher. ***LL***- Coach Stream or higher

What is your current certified Coaching level?

Expiration Date: _____

Other current certifications you hold.

Have you completed the Preventive Services Course/Speak Out/Respect in Sport? (this does not include the Parent Respect in Sport) Yes No



Have you attended any upgrade/refresher courses related to hockey? Yes No

If yes, please specify _____

Have you ever been dismissed or suspended by any minor sports organization?

Yes No

Have you ever received a Gross Misconduct / Match Penalty during or following a minor hockey game as a carded team official? Yes No

If yes, please specify: _____

Have you ever been involved in a physical altercation with anyone before/during/after a game? Yes No

If yes please specify: _____

Section 4: Coaching Philosophy (use additional pages if required)

Define your coaching philosophy _____

Describe what knowledge or skills you want to focus on for the upcoming season:

What additional activities would you plan outside the ice time provided by PDMHA?

What do you plan for your team rules? _____

How, or do you, plan to use AP players?

What, in your opinion, is a successful season?

Section 5: Discipline (use additional pages if required)

How would you take action in the following scenarios?

1. Player disrespect towards the coaching staff, fellow team members, spectators or game officials: _____

2. Habitual lateness or absence from practice: _____

3. You have a parent who is not in accordance with the Parent Code of Conduct: _____

Section 6: References (minimum of 2)

Please provide at least two personal references with e-mail and phone numbers:

1. _____
2. _____
3. _____

Feel free to provide any additional information, either below or on a separate



attachment.

Coach's Acknowledgement

If selected as a coach for Port Dover Minor Hockey Association (PDMHA), I hereby agree to:

1. Teach and display fair play and sportsmanship and expect the same from all my players and coaching staff.
2. Abide by all applicable Hockey Canada / OHF/ OMHA constitution, bylaws, rules and regulations and any additional rules and regulations as set forth by PDMHA.
3. Provide a list of my team officials (Manager, Asst. Coach, Trainer, etc.) to PDMHA for approval on or before July 24/2017 at 8:00pm.
4. Participate in **on ice** sessions, of the PDMHA conditioning school held in September of 2017 (dates to be announced). Or a designate from your coaching staff if you cannot attend.

******All team officials must have current police check, Speak Out or Respect in Sport and current relevant certification or be scheduled for re/certification. I understand that all courses regarding certification are mandatory courses prescribed the OMHA and agree to obtain. Team officials CANNOT be added to an OMHA roster without proper certifications.**

****** I agree to complete a Police Criminal Record Vulnerable Sector Check as per PDMHA protocol prior to the team's first ice time.**

Forward completed application to one of the following before 8:00pm on Sunday, June 25 / 2017

Email is preferred method of delivery:

- 1) P.O. Box 1397, Port Dover, On N0A 1N0 Attn: Steve Masschaele
- 2) email to stevem@stevansinc.com

Port Dover Minor Hockey Association would like to thank you for your interest in coaching.

May/17

