

# Parry Sound Hockey Club Inc.

BOX.13 · PARRY SOUND, ONTARIO · P2A 2X2

*"Bringing Hockey to the Youth of Parry Sound"*

Tyke

Novice

Atom

Peewee

Bantam

Midget

Juvenile

## 2017 – 2018 COACHING APPLICATION

NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_

PROVINCE: \_\_\_\_\_

POSTAL CODE: \_\_\_\_\_

PHONE: (WORK) \_\_\_\_\_

HOME: \_\_\_\_\_

PHONE: (ALTERNATIVE) \_\_\_\_\_

FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### TEAM SELECTION ( Please select ☒ )

#### **FIRST CHOICE:**

- ☐ **Novice** – Under 9 years as of Dec 31
- ☐ **Atom** – Under 11 years as of Dec 31
- ☐ **Peewee** – Under 13 years of age as of Dec 31
- ☐ **Bantam** – Under 15 years as of Dec 31
- ☐ **Midget** – Under 18 years as of Dec 31

#### **SECOND CHOICE:**

- ☐ **Novice** – Under 9 years as of Dec 31
- ☐ **Atom** – Under 11 years as of Dec 31
- ☐ **Peewee** – Under 13 years of age as of Dec 31
- ☐ **Bantam** – Under 15 years as of Dec 31
- ☐ **Midget** – Under 18 years as of Dec 31

## **COACHING RESUME**

### **PAST TEAMS:**

TEAM/ASSOCIATION	CATEGORY (HL, LL, RP)	POSITION	YEAR
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**WHAT ARE YOUR OBJECTIVES AND GOALS? BOTH FOR TEAM SUCCESS AND COACH/PLAYER DEVELOPMENT.**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**WHAT IS YOUR COACHING PHILOSOPHY (Eg. Skills vs. Strategy) ?**

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**PLEASE LIST NAMES OF INDIVIDUALS YOU INTEND TO APPOINT TO STAFF POSITIONS, THEY WILL BE REVIEWED PRIOR TO ACCEPTANCE BY THE EXECUTIVE**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Have you ever received discipline or been suspended as a coach, trainer, manager, and or parent by the OMHA, a local minor sport organization or PSMHC? If yes, Please be prepared to discuss at the interview**

Please select ☒ ☐ YES ☐ NO

## **NCCP CERTIFICATION**

**COACH:**

LEVEL # _____	YEAR ATTAINED: _____	LOCATION: _____
INTERMEDIATE # _____	YEAR ATTAINED: _____	LOCATION: _____
ADVANCED # _____	YEAR ATTAINED: _____	LOCATION: _____
TRAINERS # _____	YEAR ATTAINED: _____	LOCATION: _____
PRS # _____	YEAR ATTAINED: _____	LOCATION: _____

## **REFERENCES**

- ✓ Applicant must bring two (2) signed hockey related references to his/her interview.

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**PRACTICE PLAN:** Each candidate will be responsible to prepare a 50 minute practice plan as outlined by the committee, as well as listed objectives and milestones for the team they are applying for. Each candidate will be notified of what is to be expected in the plan prior to their interview.

## NOTES

Interviews will be conducted as soon as possible.

1. The coaching decisions are final.
2. All applications must be **mailed** to the Parry Sound Hockey Club or emailed to the Secretary at [danielle@parrysoundhockeyclub.com](mailto:danielle@parrysoundhockeyclub.com) and any application hand delivered to an Executive Member will **NOT** be accepted.
3. Applicants will be notified by email or phone of the receipt of their application.

I, the applicant, hereby agree that I will conduct my duties as a Head Coach with Parry Sound Minor Hockey Association in accordance with the policies, regulations and procedures as laid out by Hockey Canada, Ontario Hockey Federation, Ontario Minor Hockey Association, Muskoka/Parry Sound Minor Hockey League and the Parry Sound Hockey Club.

I, the applicant, hereby warrant that I will disclose all relevant personal information as required by the Association, Director of Risk Management.

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### Applicant Signature and Date

**Please mail application to Parry Sound Hockey Club, Box 13, Parry Sound, ON, P2A 2X2 or e-mail to the secretary [danielle@parrysoundhockeyclub.com](mailto:danielle@parrysoundhockeyclub.com) by Aug 31st, 2017.**