

HEAD COACH APPLICATION - House League & DS

Waterloo Girls Hockey Association, Waterloo Ravens

PERSONAL INFORMATION

Name			
Address			
Email Address			
Phone #		Secondary Phone #	
Coch/NCCP ID*	*Note: Hockey ID is issued when you have completed a coaching certification. You can find past certifications by opening an account in coach.ca (link below).		
Date of Birth* (dd/mm/yy)	*Note: Date Of Birth is an optional field; it will be required when completing your Sportle account.		

HL TEAM REQUEST - Additional line for adding 2nd choice or to apply for 2 different teams.

Year (click cell & select)	Division Requested (click cell & select)	Level Requested (click cell & select) *if run	Will you have a daughter playing for this team? (provide name and previous team in box below)

PROPOSED STAFF or ROLE (Team 1) - You may enter up to 3 additional staff at the time of application and at least 1 must be female. Leave a spot blank if you do not have a female as one will have to be added. More staff may be added after teams are formed. It is recommended to have a female Trainer, if possible. The Head Coach cannot also be the only Trainer. Leave blank for DS. DS staff can only be selected after tryouts.

Role	Name	Female? (some names are hard to know)	Will you/staff have a daughter playing for this team? (provide name and previous team in box below)
Head Coach (applicant)	Applicant		

COMMITMENT

As part of this application process and in the event that I am a successful applicant:

1. I will read and uphold the WGHA Codes of Conduct, Constitution, and Bylaws.
2. I will attend a minimum of 75% of the coach mentorship sessions offered by the WGHA.
3. I will comply with all rules and regulations of the WGHA, OWHA, KGLL and all governing bodies.
4. I will undergo a Police Vulnerable Sector Check (VSS).
5. I confirm to the best of my knowledge that there are no outstanding warrants, convictions, or other negative police contact that would make me unsuitable for this position.
6. I will upgrade my coaching qualifications as required.
7. I understand that the Coaches Selection Committee (CSC) may contact other members of the WGHA, my references, and other associations concerning this application.

I agree to the Terms & Conditions stated above:

Name		Date	
------	--	------	--

PRIOR COACHING EXPERIENCE - Only new WGHHA coaches need to complete. Previous coaches may leave blank.

Year (most recent to oldest)	Association	Division/Level (eg: Bantam BB)	Position(s) (eg: Head Coach)	Comments/Additional Info

HOCKEY EXPERIENCE (please describe your hockey experience in the box below) - New coaches only.

--

COACHING CERTIFICATIONS - New coaches only. Former coaches, all the information is already on file.

#	Certification (click on cell, select from dropdown)	Certification # (if applicable)	Certification Date (if applicable, dd/mmm/yy)	Comments/Additional Info
1				
2				
3				
4				

Coaching Certification Notes *

Please see the 'Certification Standards' tab on this form to review certification requirements based on division, level, and position as well as expiry information

Coaching applicants can review their NCCP credentials, including expiry dates, at the following link (need NCCP# to access):

[Coaching Association of Canada](#)

Other Qualifications (eg: first aid) →

REFERENCES - Required for new coaches only.

Please provide three (3) references (excluding persons on your proposed staff) who would be able to comment on your experience, qualifications, and character.

Name	Address	City	Phone	Email

Please email completed application to the Director of House League at directorHL@waterlooravens.com

