



# COLD LAKE MINOR HOCKEY ASSOCIATION

7825 51 Street Cold Lake, AB T9M 0B6

## COACH SELECTION APPLICATION

This application is for returning coaches who were selected as Head Coach in the previous year and are applying within the same Division as the prior season.

Criminal Record Check is required (every 2 years)

Name: \_\_\_\_\_ DOB: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone (Res.): \_\_\_\_\_ (Bus.): \_\_\_\_\_ (Fax): \_\_\_\_\_

### TEAM SELECTION

Division: \_\_\_\_\_ Position: Head Coach / Assistant Coach  
(i.e. U7, U9, U11, U13, U15, U18, Female) (Circle which you are applying for)

### NATIONAL COACHING CERTIFICATION

**Please attach a copy of your Hockey Canada Coach Card. This can be found through your registered profile and will list all courses that you have been certified with to date.**

Are you interested in taking any upcoming courses? Initiation Program, Coach Level, Intermediate Level, Speak-out Program, Safety Program, etc.

\_\_\_\_\_

Are you available to coach early morning weekday practices? (Check one) Yes \_\_\_\_\_ No \_\_\_\_\_

Do you have any prior obligations that may restrict the amount of time you can commit to coaching? If yes, please explain (answering yes will not disqualify you as a coaching applicant).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

References: (list three references i.e. player (12 & over), parents, and professional)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (res.): \_\_\_\_\_ (Bus): \_\_\_\_\_

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (res.): \_\_\_\_\_ (Bus): \_\_\_\_\_

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Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone (res.): \_\_\_\_\_ (Bus): \_\_\_\_\_

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I agree to follow Bylaws, Regulations and Policies as set out by CLMH, Hockey Alberta, Hockey Canada and other governing hockey bodies. I agree to embrace and follow Fair Play code, as set out by Hockey Canada

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Final decisions for approval on coaching applications will come from the CLMH Board of Directors. Successful applicants will be contacted by the Division Director.