

GRUNTHAL MINOR HOCKEY COACHING APPLICATION

Personal Coach Profile/Application

Any person applying for a coaching position with GMH must complete this profile form in its entirety. All coaching applications must be submitted by the deadline date.

For the coach to be chosen for a given position, the following information will be used as a guideline to make a fair decision. If more than one application is received for a position, interviews will be held by the GMH Executive.

Name: _____

Address: _____ Telephone: Home: _____
_____ Cell: _____

Email: _____

Have you ever been charged with a criminal offense involving minors? Yes No

If "Yes", please explain: _____

Coaching Position Applying for: _____

(if greater than one, indicate first, second, etc. preference)

Your Coach Assistants/Managers (if known): _____

Your Coaching Certification Levels: _____

Previous Coaching Experience: _____

Have you ever been suspended from coaching? Yes No

If "Yes", please explain: _____

Will you have a child playing hockey in Grunthal this season? Yes No

_____ Age Group

Will your child be playing for the team you have applied for? Yes No

Please indicate your monetary expectations: _____

If you were involved in or coached last year, provide the name and phone number and/or email of three players/parents that were on your team that can reference your coaching ability:

Name Phone Number and/or Email

- _____
- _____
- _____

Who were your Assistant Coaches & Managers last year?

Name Phone Number and/or Email

- _____
- _____
- _____

Why do you want to coach hockey this year?

List previous hockey coaching experience together with age group/league years:

_____ Please
list any other relevant experience (player evaluations, hockey school, camps, provincial or national
experience):

List any personal or professional development activities you have taken in the past five years (books, seminars, clinics, etc.) and the date of the completion of the activity:

Briefly describe your Coaching Philosophy:

Briefly describe your Season Plan & Objectives:

Date: _____ Signed: _____

GMH reserves the right to check references

Please send completed Application to:

BY EMAIL: kendallneufeldgmhplayerdevelopment@gmail.com

Phone: Kendall Neufeld: 204-371-2830

APPLICATION DEADLINE: September 20, 2016

COACHING CERTIFICATION DEADLINE: December 1, 2016

REMINDER: YOU MUST COMPLETE HKY UNIV & RIS (ONLINE) BEFORE YOU CAN REGISTER FOR A CLINIC

Coach clinics begin in the middle of October through to the end of November each season.

Coaching Requirements

| Initiation (6 & Under) | Coach 1 - Intro to Coach (IP) | Coach 1 - Intro to Coach (IP) |
|-----------------------------------|---|---|
| Novice | Coach 1 - Intro to Coach (IP) or Coach 2 - Coach Level | Coach 1 - Intro to Coach (IP) or Coach 2 - Coach Level |
| Atom | Coach 2 - Coach Level + Checking 1 | Coach 2 - Coach Level |
| Pewee | Coach 2 - Coach Level + Checking 1 | Coach 2 - Coach Level |
| Bantam AA, A, B, C, D | Coach 2 - Coach Level + Checking 1 | Coach 2 - Coach Level |
| Midget AA, A, B, C | Coach 2 - Coach Level | Coach 2 - Coach Level |

