



**Lambton Shores Minor Hockey Association  
P.O. Box 1448  
Forest, Ontario, N0N 1J0**

**COACHES APPLICATION**

This application form should be completed and returned no later than the Annual General Meeting of each year.

**Personal Information**

Last Name	First Name	Initial
Mailing Address		Postal Code
City		

Phone #	Alternate Phone #	Cell #
e-mail Address		

**Police Check**

For all positions in Lambton Shores Minor Hockey a current Police Check is required as one of the elements of the application and selection process. A current Police Check (within the last 4 years) must be obtained prior to the application being considered by the Coaches Selection Committee. The Police Check will be obtained from the local Police Dept by the Risk Management Coordinator, once the application for a record check has been complete by the applicant. The fee associated with a Police Check is waived for volunteers, at the present time.

**Qualifications (Please fill all applicable information)**

**National Coaching Certification Program (NCCP)**

	Yr attained	Certificate #
<b>Preventive Services – mandatory</b>		
<b>CHIP Certification</b>		
<b>Coach Stream</b>		
<b>Development 1</b>		
<b>Development 2</b>		
<b>Intermediate</b>		
<b>I am prepared to enroll in Upgrading clinics, as needed</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Criminal Record Check - Most Recent Year Completed</b>		

**Hockey Trainers Certification Program (HTCP)**

	Yr attained	Certificate #
<b>Level 1</b>		
<b>Level 2</b>		
<b>Level 3</b>		

**Resume :**

- Please attach your ‘Coaching Resume’ outlining all coaching experience.

**Season Plan:**

- Please attach a yearly plan to outline your season. Included should be your anticipated short term and long term team goals.

**Questions:**

**1. What is your coaching philosophy?**

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**2. What motivates you to coach ?**

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**3. What is the anticipated role of your assistant coaches, manager, and trainers?  
Briefly Outline**

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**3. What are your team initiatives, objectives and goals for the upcoming season?**

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**4. Tell me how you would resolve a situation where the kids on the team are not getting along or you can't motivate your team?**

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**5. Please provide three coaching skills that you believe are your strengths?**

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**6. Please provide three coaching skills that you need to improve?**

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**Team Choices** – The selection Committee will attempt to accommodate coach selection choices, however you will be considered for all available coaching opportunities.

1.	
2.	
3.	

**List of confirmed members of your “Bench Staff” - (It is very difficult to evaluate bench staff when multiple teams have the same person(s))**

	Name	Level	Yr Attained
Assistant Coach			
Assistant Coach			
Trainer			
Assistant Trainer			
Manager			

I, \_\_\_\_\_ understand that by completing this Application for and submitting the required documentation does not guarantee a position within the Lambton Shores Minor Hockey Association organization.

Signature

Date

Remember to attach: ☐ Coaching Resume ☐ Police Check Application (as applicable)  
☐ Yearly Season Plan (Long and Short term goals)

Thank you

Please return in confidence no later than the Annual General Meeting to:

**Secretary**  
**Lambton Shores Minor Hockey Association**  
**PO Box 1448**  
**Forest, Ontario, N0N 1J0**

Personal information on this form is collected for the purposes of determining suitability for volunteer coaching positions. Question regarding this collection should be directed to the President, at the above noted address.

Office Use:

Date	Notes