SELECT APPLICATION

| Name: | | | | | |
|---------------|--|--------------------------|-----------------|-----------------|-------|
| Section 1 — | - Contact Information | | | | |
| Phone: | | | | | |
| Email Addres | s: | | | | |
| Home Addres | ss: | | | | |
| | | | | | |
| Section 2 — | - Team Information | | | | ı |
| I am applying | for the following rostere | ed select team | (please circl | /e <i>)</i> : | |
| U7 | U8 | U9 | U10 |) | |
| U11 | U12 | U13 | U14 | 1 | |
| U15 | U16 | U18 | U2 ² | 1 | |
| I am applying | for the following positio | n on the team | (please circl | e): | |
| Head Coach | Assistant Coach | Traii | ner | Manager | |
| | child eligible to play on child's ability (<i>please ci</i> | | nich you are | applying, how w | ould/ |
| Below averag | e Average | Abo | ve Average | | |
| At what level | did your child compete l | ast season (<i>pl</i> e | ease circle)? | • | |
| None | House League | Select | Α | AA | AAA |

| Are v | you applying | as an i | ndividual | or as a | a aroup (| please | circle)? |
|-------|--------------|---------|-----------|---------|---------------|--------|----------|
| , | , | ~~ ~ | | O. 00 0 | , y. o o.p. , | , p | 00.0, . |

Individual

Group

If you are applying as part of a group, please list the names of your bench staff and the position for which you are recommending them.

| Name of Staff | Recommended Position |
|---------------|----------------------|
| | |
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| | |
| | |

Please provide information about the ability and experience level of your staff's child.

| Name of Staff | Child's Name | Ability* | Level Last Season |
|---------------|--------------|----------|----------------------|
| | | | |
| | | | |
| | | | |
| | | | |

^{*}Below average, average, above average

Section 3 — Experience / Qualifications

| Season: | | Association: | | |
|--------------|---------|---|----------|----|
| Position hel | d: | | | |
| | | | | |
| Season: | | | | |
| Position hel | d: | | | |
| | | | | |
| Season: | | Association: | | |
| Position hel | d: | | | |
| Remarks: _ | | | | |
| | | P Coach Level? | | |
| Year Obtain | ed: | Expiry Date: | | |
| Have you co | omplet | ed the Respect in Sports (RIS) course? | Yes | No |
| Have you co | omplet | ed the Gender Identity Expression course? | Yes | No |
| Have you at | tended | any upgrade/refresher courses related to hockey? | Yes | No |
| Do you have | e a cur | rent Police Vulnerable Sector Check? | Yes | No |
| Have you ev | ver bee | en dismissed or suspended by any amateur sports orga | anizatio | n? |
| Yes | No | If yes, why: | | |
| Have you ev | ver rec | eived a gross misconduct penalty during or following a | game? | > |
| Yes | No | If yes, for what? | | |
| Have you ev | ver bee | en involved in a physical altercation before / during a g | ame? | |
| Yes | No | If yes, provide details: | | |

Section 4 — Coaching Philosophy

(Use additional pages if required.)

Why do you want to coach hockey?

Describe what knowledge or skills you can teach these players beyond, or in addition too, what they learned last season.

What, in your opinion, is a successful season?

How many player changes does this team need to have a successful season?

What is your personal opinion on the subject of equal ice time?

How do you discipline players in the following scenarios?

- 1. Disrespect towards the coaching staff
- 2. Disrespect towards fellow team members
- 3. Habitual lateness or absence from practice

What is your feeling on playing school sports in addition to hockey?

| How will you pick captains and assistant captains on your team? |
|---|
| If you decide to let the players pick the captains and assistants, how should it be done? |
| How do you intend to convey team rules to the parents? |

Section 5 — References

Please submit any references you would like considered.

| Name | Home Phone Number | Email Address |
|------|-------------------|---------------|
| | | |
| | | |
| | | |

Section 6 — Disclaimer and Signature

I/we agree to abide by all Markham Minor Hockey Association rules and bylaws. I/we further understand and agree that the Head Coach bears ultimate responsibility for any and all team staff conduct or lack of performance in their duties. It is also understood that all signing parties are subject to discipline or suspension at the discretion of the Markham Minor Hockey Association Board of Directors. I/we agree to have a Police Vulnerable Sector Screening check completed prior to being appointed as team staff.

I/we AGREE to all terms and conditions

| Name (please print) | Signature | Position |
|---------------------|-----------|----------|
| | | |
| | | |
| | | |
| | | |

Thank you for taking time to apply with the Markham Minor Hockey Association.

Good Luck!