**Caledon Female Hockey Association**

Rep Coach Application 2023-2024

**DUE FRIDAY NOVEMBER 18, 2022**

We are accepting applications for the following age groups/divisions:

**U15 AA U18 AA**

Please email this application form along with your Coaching Resume to the attention of VP Rep: **vprep@caledoncoyotes.ca**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| ***1st Choice of Team*** |  | | | | | | | | ***2nd  Choice of Team*** | | | | |  | | |
| ***Name:*** |  | | | | | | | | ***Daughter's*** *Name & Year of Birth:* | | | | |  | | |
| ***Address:*** |  | | | | | | | | ***PHONE:***  *Home #*  *Cell #* | | | | |  | | |
| ***E-mail:*** |  | | | | | | | |  | | | | |  | | |
| ***Coaching Information:***  Please provide a copy of the below certification(s) with your application. | | | | | | | | | | | | | | | | |
| **COACHING CERTIFICATION** | | | | | | | |  | | | | | | | | |
| Certificate | | | | Yes/No | | | | Year Attained | | | | | | | Expiry Date | |
| C.H.I.P. | | | |  | | | |  | | | | | | |  | |
| Coach level | | | |  | | | |  | | | | | | |  | |
| Speak-out | | | |  | | | |  | | | | | | |  | |
| Trainers | | | |  | | | |  | | | | | | |  | |
| First Aid | | | |  | | | |  | | | | | | |  | |
| *\*\*Do you have a current* ***Police Volunteer Screening with the CFHA?*** | | | | | | | | | | | | | | |  | |
| ***Coaching Experience:*** | | | | | | | | | | | | | | | | |
| ***Association:***  *(ie CFHA)* | | | ***Dates?***  *(ie 2010-2013)* | | | ***Position***  *(ie Head Coach)* | | | | | | ***Division/ Category:***  *(ie Atom)* | | | | ***Tier Level***  *(ie AA)* |
|  | | |  | | |  | | | | | |  | | | |  |
|  | | |  | | |  | | | | | |  | | | |  |
| *See Resume* | | |  | | |  | | | | | |  | | | |  |
|  | | |  | | |  | | | | | |  | | | |  |
| ***References:*** (for previous coaching experience with other Associations if applicable) | | | | | | | | | | | | | | | | |
| ***Name*** | | | | | ***Association*** | | ***Phone*** | | | | | | ***Email*** | | | |
|  | | | | |  | |  | | | | | |  | | | |
|  | | | | |  | |  | | | | | |  | | | |
| Please briefly describe your **Coaching Philosophy:** | | | | | | | | | | | | | | | | |
| See Resume | | | | | | | | | | | | | | | | |
| By signing this application I agree to give the Caledon Female Hockey Association authorization to complete any necessary background checks. I am aware that I must submit a completed proof of police check or consent to disclosure waiver form as a part of the selection process.  I hereby certify that the above information is completely true and represents an accurate description of my qualifications. | | | | | | | | | | | | | | | | |
| ***Print Name:*** | |  | | | | | | | | ***Date:*** |  | | | | | |
| ***Signature:*** | |  | | | | | | | | | | | | | | |

This application will be kept private and confidential.