

# HOCKEY NEWFOUNDLAND & LABRADOR PEEWEE/BANTAM AAA- STAFF APPLICATION FORM

A copy of this form is to be completed by the applicant and returned to Hockey NL Office by July 10<sup>th</sup>, 2015. Please note all applications submitted are not guaranteed a position with a AAA Team, only successful applicants will be contacted.

1. Personal	Information:				
Name:					
Home Address:					
_			ess Phone #:		
Fax:		E-mail:			
Birth date:	(mn	n/dd/yr)			
I have a child/relat	cive trying out for (Pl	ease circle one):	Yes No D	ivision: Peewee	Bantam
2 Coochi	· Stoff Docition	nlving (places	uankin and	of muoforence 4.1	noing high act)
2. Coaching	Staff Position ap	piying (piease i	rank in order	of preference, 1 i	being nignest)
Team	Head Coach	Asst. Coach	Trainer	Director of Operations	Goalie Coach
PEEWEE					
BANTAM					
Please circle your re	egion/area: Labra	ndor Western	Central	Tri Pen Tri	Com St. John's
3. Present (	Coaching Situation	n			
Current Team(s) Co	oached:				
Coaching Position(	s) on Current Team(	s) Coached:			
dodening r obieron(	o) on current ream(				
Category of Team(s	s):				
4. National	Coach Certification	on Program (No	CCP)		
Highest Level of NO	CCP Certification Atta	ained:			
Date of Completion	1:	_			

## 5. Experience Charts (Please fill in the required fields)

EXPER	EXPERIENCE AS AN INSTRUCTOR (HOCKEY SCHOOLS, CLINICS OR OTHER RELATED ACTIVITIES)					
SEASON	NAME OF TEAM	POSITION (HC/AC)	DIVISION/CATEGORY	COMMUNITY		

	EXPERIENCE AS A PLAYER					
SEASON	NAME OF TEAM	POSITION	DIVISION/CATEGORY	COMMUNITY		

P	PARTICIPATION (SEMINARS, COACHING SYMPOSIA OR OTHER RELATED ACTIVITIES)					
SEASON	NAME OF TEAM	POSITION	DIVISION/CATEGORY	COMMUNITY		

EDUCATION (PLEASE IDENTIFY THE HIGHEST LEVEL OF EDUCATION YOU HAVE ATTAINED)			
HIGH SCHOOL:			
COLLEGE:			
UNIVERSITY:			
OTHER:			

### 5. Continued

EXPERIENCE A	EXPERIENCE AS A COACH/MANGER (CLUB) - SPECIFY POSITION: HC (HEAD COACH) OR AC (ASSISTANT COACH)					
SEASON	NAME OF TEAM	POSITION (HC/AC)	DIVISION/CATEGORY	COMMUNITY		

	EXPERIENCE AS A COACH/MANAGER - PROVINCIAL (EG. HPP, SPRING CAMPS)					
SEASON	NAME OF TEAM POSITION (HC/AC) DIVISION/CATEGORY COMMUNITY					

EXPERIENCE AS A COACH/MANAGER - REGIONAL (EG. ATLANTIC CANADA, ETC)					
SEASON	NAME OF TEAM	POSITION (HC/AC)	DIVISION/CATEGORY	COMMUNITY	

EXPE	EXPERIENCE IN BRANCH PROGRAMS (IE. SKILLS CAMP, MENTORSHIP, COURSE CONDUCTOR, ETC)					
SEASON	NAME OF TEAM	POSITION	DIVISION/CATEGORY	COMMUNITY		

Other related involvements in the game not mentioned:



#### HOCKEY NEWFOUNDLAND AND LABRADOR

#### **DISCLOSURE FORM**

This form can be submitted to the HNL office by Fax (709) 489.2273 or by Email office@hockeynl.ca

#### HOCKEY NEWFOUNDLAND AND LABRADOR

32 Queensway, P.O. Box 176, Grand Falls-Windsor, NF A2A 2J4 Tel: (709) 489-5512, Fax: (709) 489-2273 E-Mail: office@hockeynl.ca Internet: www.hockeynl.ca Twitter: @Hkynl