

Centre Hastings Minor Hockey Association <u>Head Coaching Application</u>

Thank you for expressing your interest in supporting minor hockey in Centre Hastings. Please complete the following application if you are interested in a Head Coaching role for the 2019 – 2020 hockey season. Coaching applications are required for all teams/ages from Preschool to Juvenile and must be submitted to the Coaching Coordinator by May 3rd 2019. All candidates will be contacted by the CHMHA Coaching Coordinator once selections have been made. CHMHA does reserve the right to hold in person meetings for the application process. Please note that AE and Leo League coaches will be selected after determining the team status for the upcoming season and an additional Application Deadline for those teams will occur at that time.

Applications can be acquired online at <u>https://centrehastingsminorhockeyassociation.ca/</u> or by contacting the Coaching Coordinator.

Please forward your application to: the CHMHA Coaching Coordinator. Gord Leonard: <u>gord.bmr@bellnet.ca</u>

Deadline for submission of application: Friday, May 3rd 2019

Personal Information

Name:			D.O.B.:	//
Address: _				
				al Code:
Phone:				
*E-mail:				(*this is mandatory)
		Tear	n Selection	
Category:	Preschool (2015	5 & younger)	Novice (2011)	Bantam (2005-06)
	Initiation Prog. (2013-14)	Atom (2009-10)	Midget (2002-04)
	Tyke (2012)		Peewee (2007-08)	Juvenile (2001 & older)
Division:	Rep.	AE <i>(i</i>	f applicable)	Leo <i>(if applicable)</i>
If these cho	ices were not availab	le, would you	accept a different posit	ion?
Yes	No Maybe	(i.e., assista	nt coach, trainer, mana	ger, etc.)

NATIONAL COACHING CERTIFICATION (PLEASE FILL OUT APPLICABLE AREAS)

CHIP Certification (Yes No) Y	/ear Attained: _	#
NCCP Certification:		
Coach () Year Attained:	.#	
Intermediate () Year Attained:	#	
Advanced () Year Attained:	#	
Theory III () Year Attained:	#	
Advanced II () Year Attained:	#	
Prevention Services () Year Attained: _	#_	
HTCP Certification () Year Attained:	#	
Police Screening () Year Attained:	#	

COACHING EXPERIENCE

(ie: Team, position, level, positive outcomes, etc.)

BENCH STAFF

Please identify your anticipated coaching staff names (assistant coaches, trainer(s), manager) and their credentials (if known).

REFERENCES

(Please provide 2 character references. At least 1 reference must be a non-bench staff member.)

Name:	Name:
Phone No.:	Phone No.:
Email:	Email:

In signing this application, I understand that in order to be considered, I must submit to a criminal reference check. I understand that the information obtained will be confidential but may be shared with relevant organizations and references in order to obtain an appropriate assessment of my ability to assume a CHMHA coaching role.

	Date:	
Applicant Signature		
	Date:	
Witness		



C.H.M.H.A. Coaching Application Written Submission

All head coaching candidates must complete a written submission which will consist of answering a series of questions that reflect the CHMHA's philosophies, its Mission Statement and its Codes of Conduct. Answers will be scored on a 3 point scale; Exceeds Expectations (3), Meets Expectations (2) or Needs Improvement (1).

- 1) What is your philosophy on a performance based approach to coaching versus a results oriented approach?
- 2) What basic values do you attempt to teach through coaching?
- 3) What do you consider to be your strengths as a coach and the areas needing improvement?
- 4) How will you handle the stresses of being a coach in a small community? How do you foresee problems being handled?
- 5) What role does positive reinforcement play in your coaching style?
- 6) How do you develop team unity?
- 7) What kind of relationship will you foster with your bench staff, parents/guardians and the Grizzly membership in general? Provide examples.
- 8) How will you use the CHMHA Codes of Conduct to create a positive culture on your hockey team (please be specific)?
- 9) Please illustrate and detail, on the attached Hockey Canada practice plan sheets below, a minimum two drills that you plan to incorporate into your team practice.

DEVELOPMEN	X Pylon IIIIII Lateral Movement Rev Pucks — Defensive Pressure
Practice No. Date: Theme: Time: Drill Name:	Duration:
Time: Drill Name:	Key Execution Points (KEP)
Time: Drill Name:	Image: Constraint of the securition Points (KEP)
	For additional pads, visit the OMHA Store at www.omha.nu