

Chatham Kent Cyclones AAA Hockey Association

2023 – 2024 COACHNG & STAFF APPLICATION

THE APPLICANT

If applying for the first time, each member of any proposed staff must complete the Application

Name:						
Address:						
Home Phone:			Cell Phone:			
Email:						
What is the highest lev		ou played:				
Please circle and indicate						
Coaching Certificatio	n: YES	NO	Trainer's Certifi	ication: YES	3	NO
Present Team:						
	(Age/Div	vision)	(Position I	Held)		(Centre)
Previous Teams:					Year	
					Year	
					Year	
					Year	
1.		2.		3.	3.	
Names of Proposed Staff	·.	.				
(Name)			(Position)		(Contact Number)	
you are not applying for	r a Head Coac	h Position na	ame the Head Coach	n on whose st	aff vou v	vish to be placed:
			ame incritate coust			non to be placed.
you are not selected for	r either one of	vour identifie	d age/division prefer	ences, are vo	u willina	to be part of another
aff (please indicate tear		,	a aga, a p. a	, , , .		
OR PARENT APPLICA	NTS - WHER	E DID YOUR	CHILD PLAY LAST	ΓYEAR?		
My Child – Age and Di	vision:					

омміт								
	ГМЕПТ							
am th	ne successful applicant (please ini	tial each item):						
	I will attend coach mentorsh	I will attend coach mentorship sessions as offered by Chatham Kent Cyclones						
		I will provide fully completed season plans, practice plans, team budgets and other materials as requested by Chatham Kent Cyclones for the coaches' file.						
	I will comply with the Chatha	I will comply with the Chatham Kent Cyclones Code of Conduct Policy						
	I will comply with the Alliand and Procedures Module.	I will comply with the Alliance Code of Conduct included in the Alliance Hockey Speak Out Policies and Procedures Module.						
		I will ensure that a current Police Reference Check is provided for me and all staff prior to commencing any hockey team activities on and off the ice. This includes the 2016 tryouts.						
additic	on to games and assigned practice	es, I expect my team to be involve	d in the following activities:					
	NAL INFORMATION							
mploy	ver and Occupation:							
nterest obbies	ts and s:							
ve not	t previously completed this Applica		ber for less than three (3) years and rences (excluding persons on your tions and character:					
DITIC	(Name) ONAL INFORMATION	(Relationship)	(Contact Number)					
ase p	provide us with any additional infor	mation that you feel is of importan	ce related to your application:					

SELECTION

I agree that if selected, I:

- will upgrade coach and/or trainer certifications as requested by Chatham Kent Cyclones
- will attend all coaches meetings; abide by Chatham Kent Cyclones Constitutions and By-laws
- will comply with all rules and regulations of Chatham Kent Cyclones and those controlling bodies
- understand that the Coaches Selection Committee may contact other members of the Chatham Kent Cyclones, my references and other associations concerning this application.

Signed:	Dated:	

SPECIAL NOTES

Applications for should be submitted no later than February 18, 2023.

Note: All Head Coaching positions are considered *Open* annually and all potential coaches, including returning coaches, must complete the application and may be required to attend an interview.

RETURN APPLICATIONS TO

Chatham Kent Cyclones Selection Committee
Via e-mail at: colea@chatham-kent.ca and dcaitken3307@gmail.com
Via regular mail at: Chatham-Kent Cyclones

P.O. Box 33

Chatham ON N7M 5K1