

Chatham-Kent Cyclones AAA Hockey Association

2026 – 2027 COACHNG & STAFF APPLICATION

THE APPLICANT

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

lamas.				
lame:				
ddress:				
Iome Phone:		Cell Phone:		
imail:				
What is the highest level of ho	ckey you played:			
Please circle and indicate level:				
Coaching Certification: YES	S NO	Trainer's Certification:	YES	NO
Present Team:				
	(Age/Division)	(Position Held)		(Centre)
Previous Teams:			Year	
			Year	
			Year	
			Year	
SE/DIVISION PREFERENCE				
l.	2.	3.		
	2.	3.		
	2.	3.		
	2.	3.		
	2.	3.		
	2.	3.		
Names of Proposed Staff:	2.		(Com	tact Number)
Names of Proposed Staff: (Name)		(Position)		tact Number)
Names of Proposed Staff:		(Position)		
Names of Proposed Staff: (Name)		(Position)		
1. Names of Proposed Staff: (Name) you are not applying for a Head		(Position)		
(Name) /ou are not applying for a Head /ou are not selected for either	d Coach Position, na	(Position) me the Head Coach on whos	se staff you w	vish to be placed:
Names of Proposed Staff: (Name) You are not applying for a Head	d Coach Position, na	(Position) me the Head Coach on whos	se staff you w	vish to be placed:

FOR PARENT APPLICANTS - WHERE DID YOUR CHILD PLAY LAST YEAR?

My Chi	ild – Age and Division	:		
My Ass	sistant's Child – Age a	nd Division	:	
СОММІТ	MENT			
	e successful applicant	· (please ini	tial each item):	
1.		**	ip sessions as offered by Chatham F	Cent Cyclones
2.	I will provide fully	y completed	I season plans, practice plans, team	•
3.	- 		t Cyclones for the coaches' file. am Kent Cyclones Code of Conduct	Policy
4.	- 	the Alliand	e Code of Conduct included in the A	•
5.	I will ensure that	a current F	Police Reference Check is provided for am activities on and off the ice. This	
DEDSON	IAL INFORMATION			
	er and Occupation:			
Interests	s and Hobbies:			
have not	previously completed	this Applica	u have been a coach or staff membe ation, please provide three (3) referen ment on your experience, qualificatio	nces (excluding persons on your
1.				
2.				
3.				
	(Name)		(Relationship)	(Contact Number)

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Please provide us with any additional information that you feel is of importance 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

Application forms should be submitted no later than January 10th, 2026.

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: dcaitken3307@gmail.com (President Dan Aitken) AND
emerritt@waddickfuels.onmicrosoft.com (Vice President Evan Merritt)