



Semiahmoo Ravens Hockey Rep Coach Application

Name:	
Hockey Canada ID:	
Home Address:	
Phone Number:	
Email Address:	
Employer Info:	
Division/Team:	<i>(Which team are you applying to coach?)</i>

1. Certifications/ Coaching Levels

Check if completed	Course Name	Date Completed	Expiry Date
	Criminal Records Check		
	Respect in Sport for Activity Leaders		
	Concussion Awareness Training Tool		
	Coach 1		
	Coach 2		
	Development 1		
	High Performance 1		
	HU-Online Safety		



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2. Coaching Experience in the previous three (3) seasons:

Season	Association/Organization	Division/Team (ie: U15 A2)	Position on Team

3. Please provide three (3) Coaching References:

	Name	Phone Number	Relation to you:
1			
2			
3			

4. Coaching Philosophy *(attach documents if necessary)*

Please provide a statement of your Coaching Philosophy and examples of issues or events you feel have impacted you as a coach.

5. Season Plan *(attach documents if necessary)*

Please provide your season plan for the team you are applying to coach.



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6. Please sign and forward completed application and supporting documents to admin@semiahmooravens.ca

Signature: _____ Date: _____