

WLMHA COACHING APPLICATION

PERSONAL INFORMATION Name_____ Address____ Phone_____ E-Mail____ **TEAM APPLYING FOR** First Choice_____ Second Choice_____ CERTIFICATION-please list all certifications you possess EXPERIENCE-list in order starting with most recent

Please describe your coaching philosophy
List 3 Coaching areas that you consider your strengths

List 3 Coaching areas that you wish to improve on
How do you feel about shared practices and utilization of practice time

What criteria will you use in choosing your bench staff					
Describe how you would run a typical practice					
What is your philosophy in regards to ice time					
If you have a child trying out/playing on the team, please rate them on a scale of 1-10 with10 being the strongest, 1 being the weakest					

COACHING ACKNOWLEDGEMENT & AGREEMENT

- -I hereby acknowledge and agree to abide by the WLMHA code of conduct
- -I understand that player development is a priority of WLMHA and I support this
- -I acknowledge that a list of my bench staff must be submitted and approved by WLMHA coach selection committee prior to first team practice
- -I acknowledge the Code of Conduct requirement as it relates to behaviour towards players, parents and OFFICIALS

I have read and understand the above statements and agree to conduct myself in a manner that demonstrates the standards established in the Coaching Code of Conduct and Coaching Code of Ethics

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RETURN APPLICATION BY E-MAIL
TO Jeff Carmichael: carmyeh@yahoo.ca
DEADLINE IS AUGUST 15