



COACHING APPLICATION

Thank you for your interest in coaching for the Novi Youth Hockey Association (NYHA). Please complete the form below. Once completed, please print, sign and email a copy to info@noviyouthhockey.org, or return it to the NYHA Office located at the Novi Ice Arena.

Demographic Information:		
Name:	Home Phone:	
Street and number:	Work Phone:	
City:	Zip:	Cell Phone:
Email Address:	Date of Birth:	

Desired Coaching Assignment:			
House:	<input type="checkbox"/> Mini Mite	<input type="checkbox"/> Squirt	<input type="checkbox"/> Bantam
	<input type="checkbox"/> Mite	<input type="checkbox"/> Pee Wee	<input type="checkbox"/> Midget B
Travel:	<input type="checkbox"/> Squirt A	<input type="checkbox"/> Pee Wee A	<input type="checkbox"/> Bantam A
	<input type="checkbox"/> Squirt AA	<input type="checkbox"/> Pee Wee AA	<input type="checkbox"/> Bantam AA
Season:			

USA Hockey Certification Level Attained (Please attach a copy of your coach's CEP card):			
Level 1 (Initiation):	<input type="checkbox"/>	Level 2 (Associate):	<input type="checkbox"/>
Level 3 (Intermediate):	<input type="checkbox"/>	Level 4 (Advanced):	<input type="checkbox"/>
Level 5 (Master):	<input type="checkbox"/>	CEP Certification Number:	

Previous Coaching Experience (include years, association, level):				
(Please feel free to attach any coaching resumes you may have to the application.)				
<u>Year</u>	<u>Association</u>	<u>Division</u>	<u>League</u>	<u>Capacity</u>

What is the highest level of hockey that you have played (i.e., Junior A, Junior B, Midget B,) and what is the name of the team? If college, please specify club or varsity.

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There will be a criminal background check for all selected coaches through MAHA and USA Hockey. Have you ever been arrested and/or convicted of a felony?

No

Yes

If yes, please explain:

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Coaching aspirations – short-term goals (this season):

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Coaching aspirations – long-term goals (next three seasons):

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List three skill areas you consider your strengths:

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List one area you need to improve:

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Describe your method of communicating with parents:

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Describe your method of communicating with players:

If new to the NYHA, why do you want to coach in the NYHA?

Do you have a son/daughter in the Association?

No Yes Division:

Describe how you handle discipline:

Describe how you teach individual skills:

Describe how you teach team play development:

Do you have the requisite time to be a head coach? NYHA hours are on weekday evenings, Saturday, and Sunday. The NYHA does not have fixed ice schedules. Please describe your professional commitments:

Have you ever received a major misconduct penalty where you as a coach were required to appear before a hockey hearing of some type? Have you ever been subject to any disciplinary proceedings in any other hockey association or been requested to leave an association as a coach? If so, please explain.

References:

1. Name: Phone:

Relationship:

2. Name: Phone:

Relationship:

3. Name: Phone:

Relationship:

Additional information:

As a Head Coach, I will familiarize myself with and attempt at all times to adhere to the USA Hockey Code of Conduct. As a NYHA Head Coach, I will be responsible for conducting myself as a positive role model for players selected or drafted to the team I am assigned to coach. As a role model and positive influence, I will accept responsibility for, not only my behavior and conduct, but also the conduct of my assistant coaches, managers, players, and parents. I further understand that all NYHA Head Coaches are appointed by the NYHA and that Head Coach positions are at all times, 'at will'. I further understand that this is a volunteer position and that I will not receive monetary compensation or any other form of remuneration or fringe benefit for serving in this position. I also acknowledge that inappropriate behavior of myself or my staff could result in disciplinary action by the NYHA who have the authority to remove the Head Coach, Assistant Coaches, and/or Manager at any time, if it is determined to be in the best interest of the NYHA and its members.

If selected to coach, I agree to abide by all rules and policies of USA Hockey, M.A.H.A., and the Novi Youth Hockey Association.

Signature:

Date: