



NOHA MINOR HOCKEY ASSOCIATION TEAM STAFF APPLICATION FORM



Appendix – N –revised June 2011

APPLICATION TO COACH:

Team applying to Coach: First Choice

Division	Category
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Team applying to Coach: Second Choice

Division	Category
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Team Presently Coaching:

Team Name	Division	Category
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A copy of a Criminal Record Check which includes a Vulnerable Sector Screening must accompany this application form for all persons listed below if one has not been previously submitted. A Criminal Record Check must be submitted every Four (4) years. Please place Criminal Records Check in an envelope with the persons name and "Criminal Records Check" shown on the envelope.

1. Head Coach

First Name		Last Name	
Address			
City/Town	Postal Code	Telephone Number - Home	
Telephone Number - Business	Fax Number	Email	
Criminal Records – Date issued		Coach Certification – Mandatory NOHA Number – Level -	
Initiation Program Certification- Mandatory for Novice House and Initiation Program NOHA Number -			
Body Checking – Mandatory for all Peewee Coaches and Assistant Coaches NOHA Number -			
Trainers Certification NOHA Number- Expiry Date -		Speak Out Certification - Mandatory NOHA Number -	

2. Assistant Coach

First Name		Last Name	
Address			
City/Town	Postal Code	Telephone Number - Home	
Telephone Number - Business	Fax Number	Email	
Criminal Records – Date issued		Coach Certification – Mandatory NOHA Number – Level -	
Initiation Program Certification- Mandatory for Novice House and Initiation Program NOHA Number -			
Body Checking – Mandatory for all Peewee Coaches and Assistant Coaches NOHA Number -			
Trainers Certification NOHA Number- Expiry Date -		Speak Out Certification - Mandatory NOHA Number -	



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3. Assistant Coach

First Name		Last Name	
Address			
City/Town	Postal Code	Telephone Number - Home	
Telephone Number - Business	Fax Number	Email	
Criminal Records – Date issued		Coach Certification – Mandatory NOHA Number – Level -	
Initiation Program Certification- Mandatory for Novice House and Initiation Program NOHA Number -			
Body Checking – Mandatory for all Pee wee Coaches and Assistant Coaches NOHA Number -			
Trainers Certification NOHA Number- Expiry Date -		Speak Out Certification - Mandatory NOHA Number -	

4. Trainer

First Name		Last Name	
Address			
City/Town	Postal Code	Telephone Number - Home	
Telephone Number - Business	Fax Number	Email	
Criminal Records – Date issued		Coach Certification – NOHA Number – Level -	
Initiation Program Certification NOHA Number -			
Body Checking Certification NOHA Number -			
Trainers Certification - Mandatory NOHA Number- Expiry Date -		Speak Out Certification - Mandatory NOHA Number -	

5. Manager

First Name		Last Name	
Address			
City/Town	Postal Code	Telephone Number - Home	
Telephone Number - Business	Fax Number	Email	
Criminal Records – Date issued		Coach Certification – NOHA Number – Level -	
Initiation Program Certification NOHA Number -			
Body Checking Certification NOHA Number -			
Trainers Certification - NOHA Number- Expiry Date -		Speak Out Certification - Mandatory NOHA Number -	



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8. List all Coaching Staff suspensions your team has received this past season

Name	Number of Games	Offence

Do you wish to disclose any previous record(s) of Offences?

Official Charge	Date of Conviction

An Interview may be required before a Coach and their Staff is selected.

Please forward application to:

Name:
Address:
City/Town:
Postal Code:
Email address: