



KEENE WOLVERINES GIRL'S HOCKEY ASSOCIATION

TEAM OFFICIAL APPLICATION

Please forward your application to brian.wesenberg@quillevin.com

Please note that a Criminal Record Check and Vulnerable Sector Screening of all applicants will be required prior to the 2020/21 season.

ALL APPLICATONS TO BE RECEIVED NO LATER THAN Sunday Mar. 1, 2020

SECTION ONE VOLUNTEER INFORMATION

Last Name _____ First Name _____

D.O.B

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mm dd yyyy

Address _____
House Number Street

City Postal Code

Contact Information _____
email Address

Cell Phone Number

Home Phone Number

SECTION TWO

TEAM OFFICIAL INFORMATION

Please note: All Coaches, Trainers, Managers or ANY Volunteer involved with player activities, including dressing room access, **MUST have PRS/RIS certification and must complete Criminal Record Check and Vulnerable Sector Screening.**

Forms for CRC and VSS are available through Keene Wolverine President or Registrar.

All Coaching and Bench Staff must be prepared to take the appropriate clinics required for Level of Certification requirements for the age group they are involved with.

Level of Certification can be found under OWHA Team Official Qualification Requirements Policy.

TEAM	<input type="checkbox"/>	ATOM	<input type="checkbox"/>	PEEWEE
	<input type="checkbox"/>	BANTAM	<input type="checkbox"/>	MIDGET
	<input type="checkbox"/>	INTERMEDIATE		
POSITION	<input type="checkbox"/>	HEAD COACH	<input type="checkbox"/>	TRAINER
	<input type="checkbox"/>	ASSISTANT COACH	<input type="checkbox"/>	MANAGER

CERTIFICATION

PLEASE CHECK ALL TRAINING AND CERTIFICATION LEVELS THAT YOU PRESENTLY HOLD

COACH 1	<input type="checkbox"/>	TRAINED		
COACH 2	<input type="checkbox"/>	TRAINED	<input type="checkbox"/>	CERTIFIED
DEVELOPMENT 1	<input type="checkbox"/>	TRAINED	<input type="checkbox"/>	CERTIFIED
HIGH PERFORMANCE	<input type="checkbox"/>	TRAINED	<input type="checkbox"/>	CERTIFIED
HTCP LEVEL 1	<input type="checkbox"/>	TRAINED	<input type="checkbox"/>	CERTIFIED
RESPECT IN SPORT			<input type="checkbox"/>	CERTIFIED

OTHER

PLEASE SPECIFY

SECTION THREE**BACKGROUND, REFERENCES AND PHILOSOPHIES**

1) HAVE YOU PREVIOUSLY BEEN INVOLVED WITH GIRLS HOCKEY?

YES	NO

2) ARE YOU FAMILIAR WITH THE OWHA AND LLFHL?

YES	NO

3) ARE YOU FAMILIAR WITH THE OWHA AND LLFHL REQUIREMENTS OF THIS POSITION?

YES	NO

4) ARE YOU AFFILIATED WITH ANY OTHER WOMAN'S OR MINOR LEAGUE TEAM?

YES	NO

5) HAVE YOU HELD THIS POSITION BEFORE?

YES	NO

6) WHAT LEVEL AND HOCKEY ASSOCIATION HAVE YOU HELD THIS POSITION WITH?

LEVEL

ASSOCIATION

7) HOW MANY YEARS HAVE YOU HELD THIS POSITION?

YEARS

8) HAVE YOU EVER BEEN INVOLVED IN ANOTHER CAPACITY AND IF YES, WHAT POSITION?

POSITION

9) State your coaching philosophy and development plan for this age group, as well as your goals and objectives for the upcoming season.

This can be completed on separate sheet and attached as part of this application

This must be filled out as part of the approval process.

SECTION FOUR

PLEASE READ CAREFULLY AND SIGN

I certify that the information provided is accurate and true and that I agree to complete all the required clinics, Criminal Record Check and Vulnerable Sector Screening prior to starting the 2019-20 season in the position being applied for.

I authorize the Keene Wolverines Girl's Hockey Association to collect personal information appropriate to this position. All information collected will be held in confidence and returned or destroyed upon completion of my duties of the applied position.

NAME (PRINT)

SIGNATURE

DATE

