



amended July 24, 2024

The Coaching Application package consists of the attached application form, plus the information requirements outlined below.

Incomplete applications will not be considered.

Information Requirements (please attach to your completed application form).

1. Coaching Philosophy

An outline of the principles that you would call upon to coach the team applied for. This should include your philosophy on player development and equal ice time.

2. Annual Plan

At minimum, provide an outline of the team goals and objectives for the season, specifically from both a skills and team development perspective. Include proposed tournaments, and other details of your plan for the season.

3. Budget (Proposed)

An estimate of the anticipated costs associated with your proposed plan. Use the following guidelines to produce your budget:

<u>Revenues</u>

- Player Fees

- Fundraising

Miscellaneous

- Corporate Sponsorship

Expenditures

- Tournaments: Entry Fees, Motorcoach Transportation, Air Fares, Coach Expenses
- Ice
- Additional Ice: Referees/Timekeepers
- Equipment: Team Apparel, Hockey Bags
- Misc: Sponsor Plaques, Banquet Tickets, Bank Service Charges, Sponsor Plaque, etc.

4. Coaching Resume

Provide a detailed outline of your prior coaching experience, including both educational/theory and practical.

APPLICATIONS MUST BE RECIEVED BY JULY 13TH 2025





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PERSONAL INFORMATION

Name:			
Address:		Postal Code:	
E-mail:		Home Telephone:	
Business Telephone:		Cellphone:	
Team(s) for which you are a	applying:13BB		
If you and your coaching sta choices.	iff is interested in mo	re than one team, please prioritize your	
1		2	
3		4	
Provide a list of all staff men Note: You must provide at l 1 3 Coach Certificates Achie	east two staff membe	luded on your roster. ers. All staff members require board approval. 2 4	
СОАСН	INTERMEDIATE	ADVANCED	
C1 C2	D1 D2	HP1 HP2	
NCCP #			
Please list all other pertine	nt certificates:		
Trainer	Certification #		
Speak Out Training	Certification #		
Criminal Reference Check Other: Certificates/Seminar	To be provided upo		





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Coaching Experience:

Total Number of Years _____

Year	Association	Division (Atom, Novice, etc)	Level (House, A, etc.)

Other Related Sports Experience (playing, coaching, etc.)

References:

Please provide the name and contact information of three references who can comment on your qualifications to coach the team for which you are applying. The first reference must be a Board member of your most recent association.

Name:	Telephone:	
Board/Association:		
Name:	Telephone:	
Relationship to Reference:		
Name:	Telephone:	
Relationship to Reference:		





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By signing this application, you certify that:

- i) All information you have provided is accurate and complete;
- ii) You and all members of your staff WILL obtain a Thunder Bay Police Records Check by September 1, 2025;
- All members of your staff will provide proof of applicable certification (speak out mandatory for all staff, trainers' certificate required for all trainers) by September 30, 2025;
- iv) You agree to abide by the TBWHA Constitution and Bylaws, Playing Rules, and Queens principles, policies and guidelines;
- v) You agree to upgrade your coaching skills as required; and
- vi) You consent to release of your personal information to the Thunder Bay Queens organization by the associations listed in your resume and by governing bodies including Hockey Northwestern Ontario, the Ontario Hockey Federation, and OWHA.

PRINT NAME

SIGNATURE

DATE