



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:

Revenues		<u>Expenditures</u>		
-	Player Fees	-	Tournaments: Entry Fees, Motorcoach	
-	Corporate Sponsorship		Transportation, Air Fares, Coach Expenses	
-	Fundraising	-	Ice	
-	Miscellaneous	-	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.

APPLICATION PACKAGE MUST BE RECEIVED BY Thursday, February 27, 2025 by 12:00 noon





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<u>PERSONAL</u>	INFORMA	TION			
Name:					
Address:			Pe	ostal Code:	
			Home Telephone:		
Business Telephone:					
Team(s) for v	which you ai	re applying:			
U11A	U13A	U15AA	U18AA	U22A	
If you and yo choices.	ur coaching	staff is interested ir	n more than one	e team, please priorit	ize your
1		·	2		
3			4		
Note: You mu	ust provide a	nembers that will be it least two staff me	mbers. All staff	members require bo	
3			4		
Coach Cert	ificates Ac	hieved:			
COACH		INTERMEDIATE		ADVANCED	
C1 C2		D1 D2		HP1 HP2	
NCCP #					
Please list al	l other perti	nent certificates:			
Trainer		Certification #			
Speak Out Tr	aining	Certification #			
Criminal Refe	erence Check	To be provided			
Other: Certif	icates/Semii	nars			





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Coaching Exp			
Total Number of			I
Year	Association	Division (Atom, Novice, etc)	Level (House, A, etc.)
Other Related S	Sports Experience (pla	ying, coaching, etc.)	
_ •			
References:			
•		information of three references	
•	ons to coacn the team er of your most recent	for which you are applying. The factorial sample is association.	iirst reference must be
	,		
Name:		Telephone:	
Board/Associat	ion:		
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;
- iii) 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