



Coaching Application 2012

Check off all that apply:

- | | | |
|--|--------------------------------|-----------------|
| Team Applying For (1st choice) | <input type="checkbox"/> Field | Division: _____ |
| Team Applying For (2nd choice) | <input type="checkbox"/> Field | Division: _____ |
| Team Applying For (1st choice) | <input type="checkbox"/> Box | Division: _____ |
| Team Applying For (2nd choice) | <input type="checkbox"/> Box | Division: _____ |

Contact Information

Name	_____		
Street Address	_____		
City	_____	Postal Code	_____
Home Phone	_____	Cell/Work Phone	_____
E-Mail Address	_____		

Emergency Contact Information

Name	_____		
Home Phone	_____	Cell/Work Phone	_____

Coaching Certification (check all that apply)

BOYS Box/Field:

- | | |
|--|--|
| <input type="checkbox"/> Community Coach <i>(Previously Level 1)</i> | <input type="checkbox"/> Competitive Coach <i>(Previously Level 2)</i> |
|--|--|

GIRLS Field:

- | | |
|--|--|
| <input type="checkbox"/> Community Coach <i>(Previously Level 1)</i> | <input type="checkbox"/> Competitive Coach <i>(Previously Level 2)</i> |
|--|--|

NCCP # _____

Previous Coaching Experience

Age Level: _____ Team Level: _____

What was your coaching position? _____ Year: _____

Do you potentially have a child playing at this level? No Yes

Do you have prospective coaching staff in place No Yes

Assistant Coach: _____

Assistant Coach: _____

Trainer: _____

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from coaching/playing experience

Practical

Summarize your coaching philosophy as it pertains to lacrosse

Technical

Please give a brief description of your season plan

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I have read the Code of Conduct for coaches and agree to abide by them.

Name (print)	
Signature	
Date	

Our Policy

It is the policy of this organization to promote an environment where all volunteers are respected and treated fairly with opportunities to develop leadership qualities.

Please submit the completed coaching application to: president@oakvillelacrosse.com

Deadline for applications to be submitted:

Coaching selection to be determined by:

Thank you for completing this application form and for your interest in volunteering with us.