



# Southern Tier Hockey Association, Ltd.

## Coaching Application



Coaching selections are as per Southern Tier Hockey Association (STHA) Travel, Select, or House Policies. Applicants may be subject to an interview.

Applications shall be emailed to all of the following:

Piero Lisio, VP of Travel, [PieroLisio@gmail.com](mailto:PieroLisio@gmail.com)

Patrick Basile, Assistant VP of Travel, [PBasile18@gmail.com](mailto:PBasile18@gmail.com)

Kirk Avery, President, [KirkAvery@stny.rr.com](mailto:KirkAvery@stny.rr.com)

Roy Wagner, Association Coaching and Education Coordinator, [MWagner6@stny.rr.com](mailto:MWagner6@stny.rr.com)

If unable to email then mail application to:

Southern Tier Hockey Association

ATTN: VP of Travel

P.O. Box 2765

Binghamton, NY 13902

Name (Last, First, MI): \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Current Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

1. CEP Card Number: \_\_\_\_\_ Level: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Please select the USA Hockey age-specific modules that you have completed as of this application.

8U:

10U:

12U:

14U:

18U:

Disabled:

No one will be permitted to coach, assist or be on the ice unless certified by USA Hockey at the appropriate level for which they wish to coach (including completion of age-specific modules).

2. What is your previous Coaching Experience (Baseball, Football, Hockey, etc)? (Max. 3200 characters)

3. Do you have training in any of the following? Medical: \_\_\_\_\_ CPR: \_\_\_\_\_ First Aid: \_\_\_\_\_

Name of Course: \_\_\_\_\_ Date of Training: \_\_\_\_\_

Name of Course: \_\_\_\_\_ Date of Training: \_\_\_\_\_

4. Which level(s) and position are you interested in coaching? If you are willing to be considered at more than one level, please select from the choices below.

	Division	Position
Choice #1	_____	_____
Choice #2	_____	_____
Choice #3	_____	_____



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5. Why do you want to coach at Southern Tier Hockey Association? (Max. 3200 characters)

6. What is your coaching philosophy (i.e. American Development Model, fair/equal ice, player discipline, number of practices/games, planned travel distance, etc)? (Max. 3200 characters)

7. Have you ever been convicted of or plead guilty to a crime?  
If yes, provide date(s) and circumstances on separate sheet of paper.

\_\_\_\_\_

8. Have you even been held liable for civil penalties or damages involving sexual or physical abuse?  
If yes, please provide date(s) and circumstances on separate sheet of paper.

\_\_\_\_\_

9. Have you ever been subject to any court order involving any sexual or physical abuse of a minor,  
including but not limited to a domestic order of protection?  
If yes, please provide date(s) and circumstances on separate sheet of paper.

\_\_\_\_\_

10. Have any complaints ever been made against you either at work or in your capacity as a volunteer  
that you verbally, emotionally, sexually or physically abused a minor?  
If yes, please provide date(s) and circumstances on separate sheet of paper.

\_\_\_\_\_



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11. Do you have a history of any behavior that might make you a danger to any children, youth or adolescents in this program? \_\_\_\_\_

If yes, please provide date(s) and circumstances on separate sheet of paper.

12. Have you ever been barred or suspended from being a volunteer coach with any youth sports organization? If yes, please provide date(s) and circumstances on separate sheet of paper. \_\_\_\_\_

13. Do you have any additional information you would like to provide? (Max. 2700 characters)

14. Provide three (3) references. Only one may be a relative.

1.	_____	_____	_____
	(name)	(phone)	(email)
2.	_____	_____	_____
	(name)	(phone)	(email)
3.	_____	_____	_____
	(name)	(phone)	(email)

### APPLICANT'S STATEMENT, AUTHORIZATION AND RELEASE OF LIABILITY

I certify that all information given by me in this application is true and correct to the best of my knowledge. I understand that false or misleading statements made by me or consequential omissions of any kind in the application process, are sufficient cause for my not being accepted as a volunteer or for my dismissal no matter when discovered.

I authorize Southern Tier Hockey Association to investigate all information contained in this application. The employers, organizations and individuals named are authorized to give you any and all information regarding my employment, volunteer work, character, fitness and qualifications (including opinions) that they may have about me.

In consideration of the evaluation of this application by Southern Tier Hockey Association, I HEREBY WAIVE, RELEASE AND DISCHARGE Southern Tier Hockey Association, all employers, organizations, and individuals and any other persons or entities from liability for all damages and losses of whatever kind or nature, except liability for willful or intentional acts or punitive damages, that may result from compliance or attempts to comply with this authorization.

The submission of a coach's application does not guarantee a coaching position for the season. The number of coaches required, experience and references will all be considered when appointing coaches. The Southern Tier Hockey Association reserves the right to place coaches in positions where they are most critically needed.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_