



NORTH OKANAGAN MINOR HOCKEY ASSOCIATION NEW COACH APPLICATION FORM

We would like to thank you for applying for a coaching position with the NOMHA. We understand the dedication and time required to be a good hockey coach and mentor for our young players.

The following are mandatory criteria for being selected as a coach for the upcoming season:

- RCMP Criminal Record Check. This process is done on-line and there is no cost to you or the association. It is mandated by Hockey Canada that this process is undertaken every 2 years.
- Respect in Sports. This is an on-line course and there is a charge of \$33.60. Upon successful completion of the course, you will be reimbursed by the association. It is mandated by Hockey Canada that this course is taken every 5 years.
- Hockey Canada Coaching Certification. This certificate will depend on the level of hockey (Recreation or Rep) you have been selected to coach.

Once you have been selected, you will receive an e-mail from the association on how to proceed with the above requirements.

The following are the Stages in the selection process for a coach:

STAGE 1 – SUBMIT COACH APPLICATION FORM

Submit the attached Coach Application Form complete with the following:

- A. Proof of Coach Certification (or agree to sign up and complete required coaching course).
- B. One page summary of your coaching plan for the hockey season. Summary to include:
 - Reasons for Coaching
 - Central values you want to instill in the kid's you coach
 - Central goals of your program (Maximum 5)



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STAGE 2 – INTERVIEW

An interview may be requested by the Head Coach. Topics of discussion may include:

- A. Discuss what your coaching philosophy will be.
- B. Discuss your teaching and instruction techniques.
- C. Explain how you will communicate with players and parents.
- D. General questions.

Please e-mail your application to the Association Head Coach: headcoach@nomha.com

NOTE:

U11 DEV, U13 Rep, U15 Rep, U18 Rep APPLICATIONS MUST BE RECEIVED BY JULY 5, 2024.

All Recreation APPLICATIONS MUST BE RECEIVED BY AUGUST 15, 2024.



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Name: _____
First Name Last Name

Address: _____ **Home #:** _____

City: _____ **Cell #:** _____

Postal Code: _____ **Email:** _____

Birth Date: _____ **Occupation:** _____



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PREFERRED COACHING ASSIGNMENT (Indicate 1st choice and 2nd choice)

Division	Age	Head Coach	Assistant Coach
U7	5 – 6		
U9	7 – 8		
U11	9 – 10		
U13	11 – 12		
U15	13 – 14		
U18	15 - 17		

EXISTING QUALIFICATIONS

Course	Year	Location – Provide copies of certification
Hybrid/Coach Stream (formerly Level 1)		
Developmental (formerly intermediate)		
Level 1 First Aid		
Speak Out/Respect in Sports		
HCSP Safety Course		

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COACHING EXPERIENCE

Year	Association	Ages	Location	Position

LEADERSHIP ROLES

Year	Association/Organization	Ages	Location	Position

Do you have a child registering this season in NOMHA? Yes No

If yes, what division? U18 U15 U13 U11 U9 U7

UNDERTAKINGS

- A. I hereby consent to the disclosure of the above information.
- B. I hereby acknowledge the authority of the HC, BCAHA, OMAHA and NOMHA and agree to carry out and abide by their constitution, bylaws and regulations.
- C. I agree to participate in any Coach Mentorship Programs offered by NOMHA.
- D. I agree to submit an RCMP Criminal Record Check.

Signature: _____

Date: _____

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