

SAUGEEN MAITLAND WOMEN'S HOCKEY ASSOCIATION Team Official Application Form

2014-2015

Name:			E-mail:		
Address:			Phone h:		
City/Town:			Phone w:		
Postal Code:			Phone c:		
Town Official Position Professorous (places shoot off all positions of interest)					
Team Official Position Preference: (please check off all positions of interest)					
☐ Head Coach ☐ Asst. Coach ☐ Trainer ☐ Manager					anager
Team Preference: (please submit separate application for each team of interest and state 1 st , 2 nd choice)					
☐ Midget AA ☐	Midget A	☐ Bantam AA	☐ Bantam A	☐ Peewee AA	☐ Peewee A
Experience: (Please list all of your experience relative to the position applied for)					
Certification and/or Credentials: (Please list all relative to the position applied for)					
(Flease list all relative to the position applied for)					
Philosophy: (Please state your philosophy holding the position applied for)					
Support Bench Staff:	(Please provi	de a list of assistar	nt coaches)		



SAUGEEN MAITLAND WOMEN'S HOCKEY ASSOCIATION Team Official Application Form

2014-2015

Note: Submit applications by email to: Coach@saugeenmaitlandlightning.com
**Deadline to submit application is February 20th, 2014.

All Selected Team Officials will be required to have a completed Police Record Check as part of the Interview process.

INTERVIEWS ARE AT THE DISCRETION OF THE COACHES SELECTION COMMITTEE
WE THANK ALL CANDIDATES FOR SUBMITTING THEIR APPLICATIONS