



# Kansas City Fighting Saints COACHING APPLICATION

Please Print Clearly – Application to be completed by application only

---

## 1. Contact Information

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Work Phone: \_\_\_\_\_  
 City, St., Zip \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 Home Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
 Work Email: \_\_\_\_\_

---

## 2. Team Information

Position Preference: Head Coach: \_\_\_\_\_ Assistant Coach: \_\_\_\_\_ Student Coach: \_\_\_\_\_  
 Desired Division: 8U: \_\_\_\_\_ Squirt: \_\_\_\_\_ Pee wee: \_\_\_\_\_ Bantam: \_\_\_\_\_ Midget: \_\_\_\_\_  
 Desired Skill Level: House: \_\_\_\_\_ Select: \_\_\_\_\_  
 Any Day Limitations:  
 \_\_\_\_\_

---

## 3. Previous Hockey Experience

Past Coaching Experience: Head Coach: \_\_\_\_\_ (# seasons), Assistant Head Coach: \_\_\_\_\_ (# seasons)  
 Current USA Hockey Coaching Certification Level: Level #1: \_\_\_\_\_ #2: \_\_\_\_\_ #3: \_\_\_\_\_ #4: \_\_\_\_\_  
 Certification # \_\_\_\_\_ Module Completed Through: \_\_\_\_\_  
 Other Hockey / Sport(s) Coaching Experience:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Hockey Playing Experience:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_