

Coaching Application

Selection of Coaches Criteria

1. Each year, by the time registration is completed, anyone who is interested in coaching should make their interest known to the MYHA Coaching Committee. They should be clear about which levels of play and coaching positions they would consider.
2. After teams have been selected, the MYHA Coaching Committee will match coaches to teams based upon:
 - A. Knowledge of hockey.
 - B. Teaching skills
 - C. Character, ethics, and motivation
 - D. Previous coaching experience
 - E. Other criteria felt to be important by the Coaching Committee or Board of Directors
3. Although circumstances may vary, whenever possible, the Coaching Committee will match coaches in such manner as to provide adequate instruction for the whole team.
4. All coaches will be expected to complete a USA Hockey coaching clinic and maintain a current coaching certification card applicable to the level they are coaching. MYHA will reimburse the coaches for the clinic registration fee upon completion of the clinic.
5. Each coach must read the USA Hockey Code of Ethics, USA Hockey Code of Conduct and fill out, complete and sign the MYHA Coaching Application for that year to demonstrate their understanding and agreement with the expectations.
6. Each coach must read and agree, by signature, to the MYHA Background Check and Disclosure Statement.
7. As per USA Hockey rules, anyone who participates in coaching except under emergent, temporary circumstances, must be registered with USA Hockey as a coach. MYHA also requires coaches to be registered with the association. Head coaches must be registered as coaches with USA Hockey by November 1 and with MYHA by November 15. Assistant coaches must be registered by USA Hockey by December 1 and with MYHA by December 15.
8. All WAHA and USA Hockey rules and regulations governing coaching shall apply to all MYHA Coaches.

Coaching Application

Please print all information except for signature.

Coaching Expectations

The primary function of coaching is to teach all aspects of the sport of hockey including fun, skill and knowledge as stated in the USA Hockey Coaches Code of Conduct. Part of the challenge of coaching is to provide each player with experience as equally as possible. It is unreasonable to expect that every player will get the exact same ice time or experience in all games and practices. Yet, it is possible to make the commitment that over the course of the season, no one player will have their opportunity to participate intentionally diminished at the expense of providing other players on the team with more opportunity or in the interest of winning.

Agreement

I have read the following and agree to abide:

- 1. USA Hockey Coaches Code of Ethics.
- 2. USA Hockey Coaches Code of Conduct.
- 3. USA Hockey Sexual and Abuse Policy.
- 4. MYHA Coaching Application in its entirety.

I have read and understand the above statements and agree to conduct myself in a manner that demonstrates the standards put forth in the above documents and codes. I understand that violation of these may result in the Marshfield Youth Hockey Association taking disciplinary action against me.

Printed name of applicant: _____

Signature of applicant: _____ Date: _____

Applicant Personal Information

First Name: _____ Middle _____ Last Name: _____

Address: _____ City: _____ ST: _____ Zip Code: _____

Years at Residence: _____ If less than 2 years, indicate prior residence on back

Date of Birth: _____

Drivers License: _____ State of Issue: _____

Employer: _____

Phone: H _____ W _____ C _____

E-Mail: _____ (Most correspondence is e-mailed)

Position Applying for? (Circle One) Head Coach Assistant Coach Either Goalie Coach

Level requesting to Coach:

6U	8U	Squirt	Pee Wee	Bantam
U-10 Girls		U-12-Girls		U-14 Girls

1. Current Coaching Certification? None Level 1 Level 2 Level 3 Level 4

Card Number _____ Exp. Date _____

2. Have you coached previously? Yes No
If so When? Where? And, at what level? Use back of sheet for additional room.

3. Have you played hockey previously? Yes No
If so When? Where? And, at what level? Use back of sheet for additional room.

4. What is your coaching philosophy? (having fun, winning, discipline, team work)
Use back of sheet for additional room.

5. Have you had first aid training? Yes No

6. Are you willing to follow directions from the ACE coordinator? Yes No
(What drills to use, advice in game situations, working with a team and with other coaches, following USA hockey books for instruction.)

7. What is your probability of attending: (please circle the estimated % of time)

Practices:	100	90	80	70	60	50	40	30	20
Games:	100	90	80	70	60	50	40	30	20
Tournaments:	100	90	80	70	60	50	40	30	20

Wisconsin Amateur Hockey Association Background Information Disclosure PLEASE PRINT

First and Middle Names _____ Last Name _____

Address _____ City _____ State _____ Zip _____

Birth Date _____ Social Security No. (optional) _____ Sex _____ Race _____

Any other name you have used, including Maiden name etc. _____

How long have you lived in the State of Wisconsin _____

If you have lived in another state(s) in the last 3 years, Protect Youth Sports will check with that state to comply. Please list any State(s) you have lived in.

State _____ Dates _____

State _____ Dates _____

Do you have criminal charges pending against you or were you ever convicted of any crime including federal, state, local or tribal courts for the following? Check and explain; See page 2 of this form for additional information.

____ Any offense of abuse or assault/battery-physical or sexual

____ Any crime of a sexual nature, including possession or dissemination of pornography

____ Homicide or manslaughter

____ Attempted murder

____ Domestic violence

____ Child neglect

____ Felony drug crimes

____ Animal cruelty

____ Theft, robbery, forgery, fraud

____ Kidnapping

____ Arson

____ Weapons violation

____ Any crime, involving children as either accomplice or victim

Explanation _____

_____ complete on other side.

Background Screens are not required annually and are done every three years. Regardless of screens conducted by other sports, WAHA requires a screen by Protect Youth Sports due to the national search that is completed.

I understand, under penalty of law, that the information provided above is truthful and accurate and authorize Marshfield Youth Hockey Association to complete a background check.

Signature _____ Date _____