



Greater Greenville Hockey Association COACHING APPLICATION

GGHA is now accepting applications for its 20 - 20 hockey season. GGHA is an all-volunteer, non-profit organization and we need your support! To be considered for a coaching position, please scan and email the completed application to Darren McNaughton, GGHA Hockey Director at DMcNaughton@calderbrothers.com or place application in sealed envelope addressed to GGHA Hockey Director and drop off at the Pavilion front desk.

Volunteers interested in coaching at any age level, for either house or travel, are welcome to APPLY NOW or email Darren McNaughton, Kevin Hansen (House Coordinator, khanse20@yahoo.com) or Brian Dona (Travel Coordinator, gghatravelcoordinator@gmail.com) to express interest or intent to apply. Assistant coaches for rostered teams will be selected by each team Head Coach and must be approved by the GGHA Board. Assistant Coaches will be notified by the head coach at a later date, pending board approval.

Volunteers must be willing to complete the following in order to be considered for positions within GGHA:

USA Hockey Requirements (Must be completed before participating in any team activities)

- Register as a member of USA Hockey and provide USA Hockey number confirming registration as a coach for current/upcoming season www.usahockeyregistration.com
- Complete the background screening through Carolina Amateur Hockey Association (CAHA) www.ncsisafe.com
- Complete the USA Hockey Safe Sport Training www.usahockey.com/safesporttraining

Coaching Education Program Requirements (Must be completed by Dec. 31 of the Season year)

- Find, register and attend the required certification clinic <http://www.usahockey.com/coachingclinics>
- Complete the online age-specific module(s) for the age level of play you are coaching <http://www.usahcepmodules.flexxcoach.com/>

APPLICATION:

FIRST NAME _____ MIDDLE _____ LAST NAME _____

STREET _____ CITY _____ STATE _____ ZIP _____

HOME PHONE _____ MOBILE PHONE _____ EMAIL ADDRESS _____

SPOUSE (IF APPLICABLE) _____ CHILD/CHILDREN'S NAMES (IF APPLICABLE) _____

LAST AGE GROUP COACHED/LEVEL OF PLAY _____ CEP# _____

AGE GROUP COACHED/LEVEL OF PLAY DESIRED FOR UPCOMING SEASON _____

CURRENT USA HOCKEY COACHING CERTIFICATION LEVEL: (CHECK ONE) _____ 1 _____ 2 _____ 3 _____ 4 _____ 5

DESIRED COACHING POSITION: TRAVEL HOUSE HEAD COACH ASST COACH PRACTICE COACH OTHER: _____

COACHING EXPERIENCE:

PLAYING EXPERIENCE: PLEASE INDICATE YOUR HIGHEST LEVEL OF PLAY

1. PLEASE PROVIDE A BRIEF OUTLINE OF YOUR COACHING PHILOSOPHY AS IT PERTAINS TO THE AGE GROUP, LEAGUE AND LEVEL OF PLAY YOU WISH TO COACH:

2. BASED ON THE AGE GROUP, LEAGUE AND LEVEL OF PLAY YOU WISH TO COACH, PLEASE PROVIDE A BRIEF OUTLINE OF THE GOALS YOU WILL SET FOR THE TEAM BOTH ON AND OFF THE ICE:

3. IF NAMED AS A HEAD COACH FOR THE SEASON, DO YOU HAVE PEOPLE IN MIND TO SERVE AS ASSISTANT COACHES WITH YOUR TEAM? IF SO, PLEASE LIST THOSE INDIVIDUALS:

4. LIST ANY ADDITIONAL INFORMATION YOU FEEL WILL HELP IN THE DECISION MAKING PROCESS:

BY SUBMITTING THIS APPLICATION, I RECOGNIZE THAT THE ROLE OF ANY COACHING POSITION IS VOLUNTARY AND INVOLVES SIGNIFICANT COMMITMENT OF TIME AND EFFORT THAT I AM PREPARED TO FULFILL.

Signature

Date