



## OAKVILLE RANGERS HOCKEY CLUB 2021/22 Rep Coach Application Form

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**----- Application Submission Deadline -----  
Monday, January 4 / 2021 @ 9:00am**

*Applications submitted and/or received after January 4<sup>th</sup>, 2021 at 9:00am  
will be considered only by availability of positions remaining*

### Completed applications can be submitted:

- 1) By email to [coach\\_applications@oakvillerrangers.ca](mailto:coach_applications@oakvillerrangers.ca)
- 2) By mail (must reach the office by the due date) or in person, in a sealed envelop, addressed to:  
ORHC Rep Coach Selection Committee  
Attn: Shawna Gorman  
c/o Oakville Rangers Hockey Club  
2526 Speers Rd, Unit 10  
Oakville, Ontario L6L 5M2

You will receive confirmation by e-mail when your application has been received.

***\*IF YOU DO NOT RECEIVE CONFIRMATION WITHIN 48 HOURS, PLEASE CONTACT THE ORHC OFFICE\****





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### Personal Details

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

*Please note, if selected the phone number and email address provided above will be listed on the ORHC Website*

Occupation: \_\_\_\_\_

Interests and Hobbies: \_\_\_\_\_

### Team Selection

Head Coach

Assistant Coach

**1<sup>st</sup> Choice:** Division (eg. U10): \_\_\_\_\_ Level:  AAA  AA  A  AE  MD (if applicable:  Red  Blue)

**2<sup>nd</sup> Choice:** Division (eg. U10): \_\_\_\_\_ Level:  AAA  AA  A  AE  MD (if applicable:  Red  Blue)

If these positions were not available would you be interested in coaching another level?  Yes  No

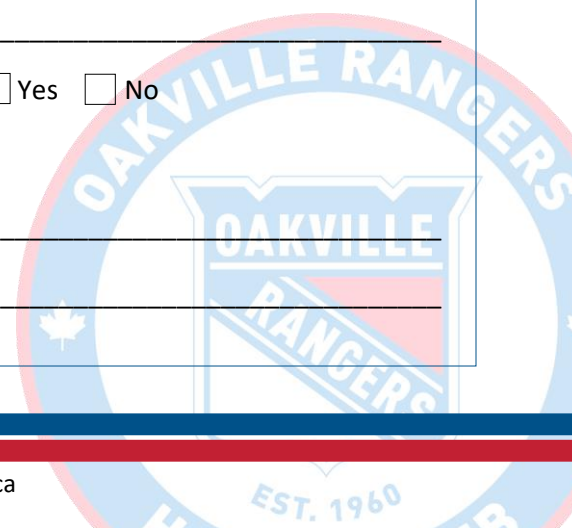
If yes, please identify what Division and Level: \_\_\_\_\_

Do you anticipate having a son/daughter on the team you are applying for?  Yes  No

If yes, please identify:

Name: \_\_\_\_\_ Position: \_\_\_\_\_

Level Played Last Season: \_\_\_\_\_ Highest Level Played: \_\_\_\_\_





## OAKVILLE RANGERS HOCKEY CLUB 2021/22 Rep Coach Application Form

### Coaching Qualifications

Please indicate below your highest level of NCCP certification:

Coach 1    Coach 2    Development 1    Development 2    HP 1    HP 2    Instructional Stream

Other: \_\_\_\_\_ Date of Certification (MM/DD/YYYY): \_\_\_\_\_

Please indicate if you have completed the following requirements:

Gender Clinic?  Yes    No      Respect in Sport Activity Leader (Speak Out)?  Yes    No

Planning a Safe Return to Hockey?  Yes    No

Vulnerable Sector Police Check?  Yes    No      Date Submitted (MM/DD/YYYY): \_\_\_\_\_

*PLEASE NOTE: all coaches must have completed or be prepared to take the clinics required for their position*

### Coaching History and Experience (most recent first, attach an extra page if required)

Dates (MM/DD/YYYY)		Organization / Team / Level	Role
From	To		

### Proposed Coaching & Support Staff (if applicable)

Trainer: \_\_\_\_\_ Child on the team?  Yes    No

Assistant Coach: \_\_\_\_\_ Child on the team?  Yes    No

Assistant Coach/Trainer: \_\_\_\_\_ Child on the team?  Yes    No

Manager: \_\_\_\_\_ Child on the team?  Yes    No

*The Head Coach will be responsible for picking their team staff. All team officials will be required to complete the Gender and RIS Courses, provide a VSPC, and other certifications as required by Hockey Canada. All team officials are subject to approval by the ORHC Board of Directors, as stated in the ORHC By-Laws.*



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### References

Please provide the names and contact information for two hockey related references (parents, former bench staff, previous coach, player, etc.) as well as one non-hockey related reference (business or personal).

#### 1. Hockey Related Reference:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### 2. Hockey Related Reference:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### 3. Non-Hockey Related Reference:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Goals and Objectives

Please attach additional information which reflects your hockey background as a coach and as a player. Describe any additional skills or training that would make you a preferred candidate for this role. Please outline your coaching philosophy and core values, as well as your seasonal plan, and identify your goals and objectives for the team you are applying for.



## OAKVILLE RANGERS HOCKEY CLUB 2021/22 Rep Coach Application Form

The ORHC requires that the Head Coach acknowledge responsibility and understanding of the following:

[Rep Rangers Manager Manual](#)

[Return to Play Protocol](#)

[Rep Team Budget Policy](#)

[Oakville Ranger s Handbook](#)

[Police Check requirement](#)

[OMHA Manual of Operations](#)

I hereby acknowledge that I understand and am responsible for ensuring compliance with the above requirements including all applicable ORHC By-laws, Policies, procedures, and the requirements of the Manual of Operations. I also understand that only applications considered by the coach selection committee to be suitable will be granted an interview. I agree that the decision of the coach selection committee is final and will hold harmless the committee, ORHC and/or any other governing body for the decision. By signing this form, I agree that the ORHC may contact me via email.

I, the undersigned, acknowledge that I have never been charged or convicted in a criminal matter in or outside of Canada. I will accept any judgment of the ORHC for my failure to abide by ORHC By-Laws and Code of Conduct, which may include suspension or removal from the Coach position. I acknowledge that I may be removed from any coaching position assigned by the ORHC at any time at the sole discretion of the ORHC. I agree to indemnify and hold harmless the ORHC for my failure to abide by ORHC, OMHA, and/or Hockey Canada guidelines.

I support the ORHC's philosophy of player development and will promote the playing of hockey at the highest level. I will accept full responsibility for my actions while acting as a team official of the Oakville Rangers Hockey Club. I understand that it is at the ORHC's sole discretion whether to proceed with the application process. I agree that the decisions of the Coach Selection Committee are final, and I hold the Committee, the ORHC, and/or any other governing body harmless for the decision.

Signature: \_\_\_\_\_

Date (MM/DD/YYYY): \_\_\_\_\_

