



FEMALE MIDGET AAA STAFF APPLICATION FORM

POSITION APPLYING FOR: (you may check more than one) - Click the following to view job descriptions [BC Hockey Policy Manual](#)

Coach _____ Assistant Coach _____ Safety Person _____
Manager _____ FMAAA League Coordinator _____

***Note that the FMAAA League Coordinator is a BC Hockey Branch position

APPLICABLE TEAM THIS APPLICATION SHOULD BE CONSIDERED FOR: (you may have more than one)

Team Name: _____

Team Name: _____

Team Name: _____

APPLICANT CONTACT INFORMATION

Name: _____

Address: _____
Street City Province / Postal Code

Telephone: _____
Home Work E-mail

Date of Birth: _____
Day Month Year

Do you have a family member involved in the Female Midget AAA Program? Yes No If yes, please explain _____

| CLUB TEAM EXPERIENCE: | TEAM | POSITION HELD | CATEGORY |
|-----------------------|------|---------------|----------|
|-----------------------|------|---------------|----------|

2010/2011: _____

2009/2010: _____

References (hockey related) 1. _____
Name Phone number

2. _____
Name Phone number

CERTIFICATION

NCCP Certification #, Level and year attained: _____
*Developmental 1 certification is required

SpeakOut/RIS Accreditation (REQUIRED) _____ Date Completed: _____

HCSP Accreditation _____ Expiry Date: _____

If not selected as head coach, would you accept the position of assistant coach? Yes No

CRIMINAL RECORD CHECK IS MANDATORY FOR ALL SUCCESSFUL APPLICANTS

Signature of Acceptance: _____

ALL TEAM OFFICIALS MUST COMPLETE AN APPLICATION FORM IN ORDER TO BE CONSIDERED FOR A POSITION.
Please return the completed application form by March 15, 2011 to info@bchockey.net or fax: 250-652-4536