

LAPEER COUNTY HOCKEY ASSOCIATION

Spring 2010

ASSISTANT COACH'S APPLICATION

(Please Type or Print Clearly)

Name _____

(Last)

(First)

(Middle)

Address _____ City _____ Zip _____

Home Phone _____ Work phone _____ Cell _____

Birthdate ___/___/___ Social Security Number ____ - ____ - ____

USA Hockey Coaching Level: Associate ___ Intermediate ___ Advanced ___ Master ___

(Please include a copy of your coaching cards with application)

Number of years coaching experience? _____ Highest level coached? _____ When ? _____

Association you coached with last year? _____ What Division & Level? _____

Have you ever been suspended by MAHA or youth organization? _____ If yes, please add letter why?

What division do you wish to coach? (Circle one) Mini-mite Mite Squirt PeeWee Bantam Midget

What level do you wish to coach? (Circle One) House B Travel A Travel AA

Are you planning on being a head or assistant coach (circle one)? Head Assistant

What was your prior year practice to game ratio? _____ Projection Practice/Game Ratio? _____

What is your coaching philosophy on games and practices? _____

What are your coaching strengths? _____

What are your coaching weaknesses? How do you compensate for them? _____

Please return this application with any references or resume to the address above, attention ACE Coordinator. Please be advised that this application will be subject to review by MAHA and the Michigan State Police. Please fill out the attached background check form. Please use back of form if additional space is needed. Only complete applications will be accepted by the LCHA for review.