



Kitchener Ringette Association BENCH STAFF APPLICATION

Name: _____

Current Address: _____

Years at current address: _____ Date of Birth: _____

Telephone: _____ Email: _____

POSITION DESIRED:

Division	1	2	3	Level	1	2	3	Position	1	2	3
Bunny				AA				Head Coach			
Novice				A				Assistant Coach			
Petite				B				Trainer			
Tween				C				Manager			
Junior								Coach-in-training			
Belle				<i>For each Division, Level and Position please indicate your 1st, 2nd and 3rd choice by checking the appropriate column.</i>							
Open											

COACHING QUALIFICATIONS: (copy of certificate is required)

NCCP Number (**REQUIRED**) _____ ORA Number _____

In the following table, please enter the date of ORA Certification:

Certification – New			
C.I. Certified		n/a	n/a
C.I. Trained 1		n/a	n/a
C.S.I. Trained		n/a	n/a
Certification – Old	Level 1	Level 2	Level 3
Theory			
Technical			
Practical			

MANAGER QUALIFICATIONS: (copy of certificate is required)

Date of Certification _____

Certificate # _____

TRAINER QUALIFICATIONS: (copy of certificate is required)

Type of First Aid Certification _____

Date of Expiry of Certification _____

N.B. In order to be registered with ORA, you must now have or must attain (before January 8 of the current season) the requisite qualifications for the position you are offered.

Past Coaching / Managerial Experience: (Use a separate sheet if necessary)

Please identify the organization/association, age and level of play and the approximate time of your involvement. Include ringette and any other sport.

Please state your Coaching Philosophy: (Use a separate sheet if necessary)

Explain, for instance, your attitude towards winning, losing, players, ice time, discipline and administrative matters.

Why do you want to coach this team? (Use a separate sheet if necessary)

If applicable, are you interested in coaching a team other than your child/children's?

Yes

No

Not Applicable

If applicable, what level of ringette did your child/children play this past season?

Not Applicable

Signature: _____

Date: _____

**Please send completed applications to:
Coaching Director
Kitchener Ringette Association
525 Highland Rd W., Box 228
Kitchener, ON N2M 5P4**