



2010 SENIOR REPRESENTATIVE COACH APPLICATION

APPLICATION CLOSING DATES: – Sept.08/09 – 5PM

Name: _____

Address: _____

City: _____ Province: _____ P/C: _____

Phone: _____ Email: _____

Cell Phone: _____ Passport Size Photo: ***Please include ***

AGE GROUP YOU WISH TO COACH IN 2010

OSL OWSL YRSL-S

PREVIOUS RELEVANT EXPERIENCE

Club registered with in 2009: Newmarket Other _____

Team Coached in 2009: _____
Attach additional supporting documentation/information if available.

Last Date of Personal Development: _____

Upcoming Dates For Personal Development: _____

COMMUNITY COACH CERTIFICATION

Recognized Levels Completed:
 Children's (U6-U10) Youth (U10-U14) Senior (U14+) Laws of the Game

Last Certification Date (MM/DD/YY): _____

Other Soccer/ Sporting Qualifications: _____

Please contact the Technical Director for more information about in-house and certification coaching clinics.

***** Please provide a photocopy of the certificates to be considered valid *****

*Thank you for your interest, however, only those candidates selected for an interview will be contacted.
 All applications must be accompanied by a successfully completed Vulnerable Sector Screening form (YRP149-12/08).
 Any and all coaching applications forms different from this one will be null and void.
 All competitive coaches interested in applying for a coaching position must have obtained a Community Senior level certificate.*

Signature: _____ Date: _____

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