



2026-2027

KC ELITE COACH APPLICATION

APPLICANT INFORMATION:

Name _____

Phone _____

Address _____

Email

COACHING PREFERENCE – Please indicate preference in order (eg. 1, 2, 3):

U11 AA

U13 AAA

U13AA

U15 AAA

U15AA

U17AAA

U16AA

U18 AA

RECENT EXPERIENCE

| Season | Team | Level/Age Group | Organization | Role |
|--------|------|-----------------|--------------|------|
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| | | | | |
| | | | | |
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QUALIFICATIONS

Copies of Certificate Attached

OTHER QUALIFICATIONS

GOALS – SHORT AND LONG TERM

REFERENCES

Copies of Reference Letters Attached

| Name | Relationship | Phone Number |
|------|--------------|--------------|
| | | |
| | | |
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I hereby authorize the Knights of Columbus Hockey Club to conduct any investigation deemed necessary to verify my credentials, qualifications and character in order to meet their Coach Selection Requirements. Should I be selected, I agree to take part KC Coach Mentorship Information Sessions and to follow the Coach Mentorship Program. I am aware that if I am selected, I will be required to complete a Vulnerable Sector Information check, which is part of a Police Information Check and will be facilitated through the Knights of Columbus Hockey office.

Application submission deadline is February 21/26.

Applicant Signature

Date

Applications can be submitted by Email to office@kchockey.ca