



Coach Application Form

SECTION A – Basic Information			
Name (first name, last name) [Redacted]	Home Phone [Redacted]		
Street Address (include apartment, rural route, etc. as appropriate) [Redacted]	Work Phone [Redacted]		
	Fax [Redacted]		
City/Town [Redacted]	Province [Redacted]	Cell Phone [Redacted]	
Postal Code [Redacted]	Primary Email Address [Redacted]	Alternate Email Address [Redacted]	
Preferred Coaching Position			
	1 st Choice Age: U [Redacted] Male <input type="checkbox"/> Female <input type="checkbox"/>	2 nd Choice Age: U [Redacted] Male <input type="checkbox"/> Female <input type="checkbox"/>	3 rd Choice Age: U [Redacted] Male <input type="checkbox"/> Female <input type="checkbox"/>
Do you have a son/daughter playing with LCYSA? Yes <input type="checkbox"/> No <input type="checkbox"/>			
In order to assist us in planning for future training programs, please answer the following: I am interested in being assessed/evaluated for the advancement of my coaching skills: Yes <input type="checkbox"/> No <input type="checkbox"/> I am interested in pursuing further coaching certification courses or licenses: Yes <input type="checkbox"/> No <input type="checkbox"/>			

SECTION B – Coaching Qualifications		
N.C.C.P. Number [Redacted]	Community Coach – Youth (month/year) [Redacted]	Provincial “B” License Part 1 BCSA (month/year) [Redacted]
BCSA Coach Number [Redacted]	Community Coach – Senior (month/year) [Redacted]	National “B” License Part 2 CSA (month/year) [Redacted]
Community Coach – Children (month/year) [Redacted]	Provincial “Pre-B” (month/year) [Redacted]	National “A” License CSA (month/year) [Redacted]
Other relevant qualifications, e.g. international courses/licenses/certifications, etc. (description/month/year) [Redacted]		

SECTION C – Previous Coaching Experience				
I have coached LCYSA Soccer teams since: _____				
If you have coached other teams, please provide details in this section.				
Year [Redacted]	Club [Redacted]	Age U [Redacted]	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	League/Div [Redacted]
Year [Redacted]	Club [Redacted]	Age U [Redacted]	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	League/Div [Redacted]
Year [Redacted]	Club [Redacted]	Age U [Redacted]	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	League/Div [Redacted]
Year [Redacted]	Club [Redacted]	Age U [Redacted]	Gender Male <input type="checkbox"/> Female <input type="checkbox"/>	League/Div [Redacted]

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SECTION D – Personal References – new coaches only		
Reference #1		
Name (surname, given name) [Redacted]	Home Phone [Redacted]	
Street Address (include apartment, rural route, etc. as appropriate) [Redacted]	Work Phone [Redacted]	
	Fax [Redacted]	
City/Town [Redacted]	Province [Redacted]	Other Phone (e.g. Cell) [Redacted]
Postal Code [Redacted]	Primary Email Address [Redacted]	Alternate Email Address [Redacted]
Reference #2		
Name (surname, given name) [Redacted]		Home Phone [Redacted]
Street Address (include apartment, rural route, etc. as appropriate) [Redacted]	Work Phone [Redacted]	
	Fax [Redacted]	
City/Town [Redacted]	Province [Redacted]	Other Phone (e.g. Cell) [Redacted]
Postal Code [Redacted]	Primary Email Address [Redacted]	Alternate Email Address [Redacted]

SECTION E – Additional Instructions / Information		
<ol style="list-style-type: none"> 1. A photocopy of all certificates or any other updated documentation indicating coaching levels attained must be attached to this application. Do not submit originals, as they will not be returned to you. If you are unable to provide the required documentation, please provide reasons. 2. A current police records check is a requirement for this position. Please contact the LCYSA Administrator for additional information. <p>**** We require an updated Police Records Check every year.</p> <ol style="list-style-type: none"> 3. Only those coaches shortlisted for a position with LCYSA will be contacted and candidates may be required to attend a personal interview with Club officials. 4. Coaching candidates may be required to conduct a practice session prior to selection to a coaching position. 5. Submit this form, along with all required attachments, to the LCYSA Administrator at: info@lcysa.com 		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">Applicant Signature _____</td> <td style="width: 40%; border: none;">Date _____</td> </tr> </table>	Applicant Signature _____	Date _____
Applicant Signature _____	Date _____	

SECTION F – Comments
Provide any additional information or comments you feel are pertinent to your application. [Redacted]
For office use only: Police Check _____ Reference check _____ Interviews _____