



DIVISIONAL TEAM HEAD COACH APPLICATION FORM

APPLICATION FOR THE HEAD COACH POSITION OF:

GENDER: Boys Girls (please circle)

AGE GROUP: U11 U12 (please circle)

CALIBER:	<input type="checkbox"/> Super 8's SELECTS	<input type="checkbox"/> Super 8's RECREATIONAL	(please tick)
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AGE GROUP: U13 U14 U15 U16 U17 U18 (please circle)

CALIBER:	<input type="checkbox"/> DIV1 / DIV2 DEVELOPMENTAL	<input type="checkbox"/> DIV3 / DIV4 RECREATIONAL	(please tick)
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Surname:	First names:
Address: Postcode:	Telephone:
	Home:
	Mobile:
	Work:
	E-mail:
Date of Birth:	Are you a Canadian Citizen or have permission to work in Canada:
Marital Status:	Number of Children:

Employment: Most recent or present employment –

Employer's name and address	Dates		Position held
	From	To	

Please give brief details of your major responsibilities and duties:

Soccer Qualifications:

Please indicate which of the following qualifications/certificates you have attained.

- ACTIVE START
- FUNDAMENTALS
- LEARNING TO TRAIN
- SOCCER FOR LIFE
- B PRE TEST
- B PROVINCIAL
- B NATIONAL

Supporting information:

Please give your reasons for applying, stating your current level of certification, together with any other information you consider relevant to the post, including what you believe you can bring to the post and the work of Abbotsford Soccer Association. Please use the box below (and additional sheets if required).

Would you be willing to undertake a Practical Assessment of your Coaching Skills? (please circle)	Yes / No
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Are you willing to submit a current Criminal Records Check (CRC)? (please circle)	Yes / No
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Do you hold a valid & current driving licence? (please circle)	Yes / No
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References:

Please give details of two people who can provide references, one of whom should be your present or most recent employer.

May we contact them prior to interview? Yes / No	May we contact them prior to interview? Yes / No

Declaration:

The above information is true and correct to the best of my knowledge. If successful, my appointment will not be confirmed until I produce a Criminal Records Check that is acceptable to the Association.

Signed:	Date:
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Please E-Mail to: IAN KNIGHT
td@abbotsfordsoccer.com

OR

Drop off at the Abbotsford Soccer Association office (inside Bateman Park - 34645 Prior Avenue Abbotsford, B.C. V2S 6E9) in a sealed envelope for the attention of Ian Knight.

OR

Mail to: Ian Knight
Technical Director
Abbotsford Soccer Association
34645 Prior Avenue
Abbotsford, B.C.
V2S 6E9