

EastPro Basketball Coaching Application Form

If you have any questions about the application form please contact EastPro Basketball's Coaching Director, Adonis Borja by email: coaching@eastprobasketball.ca

All fields marked with a * **and** in **bold font** are required. For required fields with multiple choices, at least one must be selected.

SECTION 1: Contact Information

* Full
Name:* _____
Address: _____

*** Date of Birth:** _____ / _____ / _____
MM DD YYYY

* Postal
Code:* _____
Telephone: _____
Home/Primary Cell/Secondary Eg. (123) 456-7890

* **Email Address:** _____

SECTION 2: Team Application

* Preferred Coaching Assignment:

	Head Coach	Assistant Coach	No Preference
* Age Level and Division: (Check all that apply)	A	B	C
Tykes (6-8 years old)		(Division does not apply for this age group)	
Mini (9-10 years old)			
Bantam (11-12 years old)			
Midget (13-14 years old)			
Juvenile (15-17 years old)			

* Preferred Gender: Boys Girls No Preference

* Would you be willing to coach a team that you did NOT apply for?

Yes No

If so, which age and division?

* Do you have a child or other relative that could make the team for which you are applying?

Yes No

On which team do you feel your child/relative will eventually play?

Will you coach the team you applied for if the evaluation committee does not assess your child/relative to make the team?

Yes No

Will you coach the team your child/relative is assessed to be on if no other coach is available or already assigned?

Yes No

SECTION 3: Experience and Qualifications

Please fill out the following boxes with information about your past coaching positions.

Years	Organization/Community Association	Age Category & Division (see above list)	Coaching Position

Do you have any of the following certifications? (check all that apply) For certifications you have achieved, please write the year in which you received the certification in the space next to the qualification.

NCCP Level 1 _____

NCCP Level 2 _____

NCCP Level 3 _____

NCCP Level 4 _____

NCCP Level 5 _____

In Progress (Please state which one and expected completion in space below)

Other (Please specify) _____

SECTION 4: Coaching Education

*** How do you intend to convey team rules to the parents? (Check all that apply)**

In Writing Parent meeting(s) through Tell the players verbally
the team manager or yourself

*** Would you be willing to attend coaching development clinics put forth by the Eastpro Basketball Coaching Development Committee?**

Yes No

*** If available, would you follow a Eastpro Basketball Season Plan based on the age group and skill level you may coach?**

Yes

No

SECTION 5: Application Submission

Please read the following statements before submitting this application.

*** Declaration:**

1. I declare that:

- a. the above information is true and complete, and
- b. I understand that any misrepresentation of myself (whether intentional or not), through lying and/or failing to disclose all requested information, may result in:
 - i. the immediate rejection of my application, and/or
 - ii. dismissal from any accepted position(s) with Eastpro Basketball.

2. I hereby consent to:

- a. The disclosure of the above information to Eastpro Basketball for the purpose of evaluating my eligibility for the position(s) applied for, and
- b. The disclosure of the above contact information to Basketball Calgary (if selected for the applied position(s)).

3. I hereby acknowledge the authority of Basketball Alberta, CMBA, and Eastpro Basketball and agree to carry out and abide by their constitutions, bylaws, rules, and regulations.

4. I hereby agree to complete a Child Welfare Check and a Police Background Check in my full name to be reviewed by the Canadian Government and EastPro Basketball (Executive Board Members and Coach/Player Director) for final approval before interacting with any player registered under EastPro Basketball.

By checking the box below you acknowledge that you have read and agree to the above statements and are willing to accept the decisions set forth by the Eastpro Basketball Executive Board Members and Coach/Player Director in the matter of your application for the above stated coaching position(s).

I agree to abide by the above statements.

(If submitting electronically, this serves as your electronic signature)

*** Signature:** _____

*** Date:** _____ / _____ / _____

*** Print Name:** _____

MM

DD

YYYY

Before submitting your application please double check that all the information is complete and correct and read the following instructions on how to submit your application.

If you completed this form electronically or have access to a scanner, please use your full name and the date submitted as the file name (eg. John Doe August 1, 2016) and email the completed form to **Adonis Borja** at coaching@eastprobasketball.ca If you are using a PDF reader, click the submit button and save the file to your computer then email it to Adonis Borja.

Please keep a copy of the completed form for your records.