



## BURNABY METRO SELECTS COACH APPLICATION

	PERSONAL INFORMATION
Name:	
Home Address:	
Home Phone:	
Cell Phone:	
Business Phone:	
Birth Date:	
Email Address:	
Position Applied For:	
Age Group:	
Assistant or Head Coach:	

### NATIONAL COACHING CERTIFICATION

Please indicate soccer related levels achieved

<b>NCCP No.</b>	
Theory Level:	
Technical Level:	

### COACHING BACKGROUND

Year	Age Group	Club	Division	Girls/Boys	Youth/Senior	Team Name



REFERENCES

Please provide contact information of at least two people who would be willing to provide references to your general character and suitability to coach.

Name:	
Email:	
Phone:	
Name:	
Email:	
Phone:	

Have you read our Rules and Regulations? \_\_\_\_\_ Y \_\_\_\_\_ N

Do you have a son/daughter in the age group you have requested? \_\_\_\_\_ Y \_\_\_\_\_ N

Are you currently coaching with any other club or organization? \_\_\_\_\_ Y \_\_\_\_\_ N

If applying for Head Coach, do you have an assistant in mind? \_\_\_\_\_ Y \_\_\_\_\_ N

Do you have a Manager in mind? \_\_\_\_\_ Y \_\_\_\_\_ N

Will your work, schooling and/or other personal commitments interfere with team training nights or game day activities. \_\_\_\_\_ Y \_\_\_\_\_ N

Have you read the Coaches Guide? \_\_\_\_\_ Y \_\_\_\_\_ N

Have you read the Duties of a Coach? \_\_\_\_\_ Y \_\_\_\_\_ N

Have you read the Code of Conduct Forms? \_\_\_\_\_ Y \_\_\_\_\_ N





**DECLARATION:**

I declare that all of the information provided above is complete and accurate in all respects. I have read and agree to comply with, the BC Youth Select Soccer League rules and regulations, Duties of the Coach, Code of Conduct and the Burnaby Selects Coaches Guide. I will submit my consent for a criminal history check as per CCSA policy, and realize that I will not be given a team until such time as the check process is complete. I understand that if my application is accepted, the position I am given is for a one year term. After each year the club will ask that you make an application to coach again for the following year.

If you want to attach any other relevant information, please do so.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please return the completed Application Form to:

Frank Palmieri  
Chairman, Burnaby Selects Soccer Club  
1390 Duthie Ave.  
Burnaby, B.C.,  
V5A 2R4

Or via email to:

[Frpalmieri@telus.net](mailto:Frpalmieri@telus.net)

Burnaby Metro Soccer Club  
Thank you for your application