



Volunteer Softball Coach Application Form

Name: _____ Date: _____

Address: _____ Postal Code: _____

E-Mail Address: _____ Cell Phone: _____

Are you currently awaiting trial, served any sentence or probation for any charge or serious misconduct? Yes No

If yes, please provide the conviction date and indicate the nature of the conviction(s):

**All successful candidates will be required to submit a current certificate of conduct certified by the RNC that includes a vulnerable sector check before the season starts.*

Coaching Background:

1. Have you coached/managed softball teams in the past? Yes No

If yes, please list what age group you coached/managed, the sponsoring association and the approximate dates.

2. What other sports have you coached/managed? Please include sponsoring association and dates. If not, list any job skills you have that will help you in this position.

4. What Age Group would you like to Coach? Female Male
 8U 10U 12U 14U 16U

5. Which category are you interested in coaching? Check both if interested in both
 House league Community team (represent Goulds at outside tournaments)

6. Highest softball coaching certification you currently hold (if any): _____

7. What is your NCCP Coaching Number? _____

Playing Experience:

7. Have you played Fastpitch before? Yes No

If yes, describe your experience including any leagues, competitions played, provincial or national etc.

8. Most recent coaching/manager position you have held: _____

9. Do you have children in the Goulds Recreation Minor Softball Program? Yes No

If yes, at what level(s) _____

10. Please rate your knowledge of the following topics with regard to softball by circling the one that applies to you.

Number(s): 1 = I know very little about this
2 = I have reasonable knowledge
3 = I know a great deal about this

- | | | | |
|---------------------------------------|---|---|---|
| 1. Skills and strategies of the sport | 1 | 2 | 3 |
| 2. Rules of the sport | 1 | 2 | 3 |
| 3. Organizing practices | 1 | 2 | 3 |
| 4. Equipment needs | 1 | 2 | 3 |
| 5. Injury prevention and treatment | 1 | 2 | 3 |
| 6. Developing sportsmanship | 1 | 2 | 3 |
| 7. Communication skills | 1 | 2 | 3 |
| 8. Physical conditioning techniques | 1 | 2 | 3 |
| 9. Working with parents | 1 | 2 | 3 |
| 10. Managing time | 1 | 2 | 3 |

11. Have you ever been relieved from a coach/assistant coach/managerial position or placed on probation by any league or sport organization? Yes No

If yes, describe.

12. What is your coaching philosophy?

13. Why do you feel that you would be the most qualified candidate for a coaching position?

References:

NAME ADDRESS PHONE NUMBER

1. _____

2. _____

3. _____

PLEASE READ BEFORE SIGNING: As a Coach, I will:

1. Follow guidelines set out by Goulds Recreation Association
2. Follow SNL By-laws, Code of Conduct and Rules and Regulations.
3. Support Goulds Recreation and SNL and its decisions regarding softball matters.
4. Consider all decisions of Goulds Recreation and SNL Board of Directors to be final and binding.
5. Follow all public health guidelines and Return to Play guidelines in place for our province and ensure that athletes, other coaches/managers and spectators are doing the same

When there is more than one candidate for a particular coaching position, Goulds Recreation will appoint a subcommittee of board members, and the Recreation Coordinator to possibly conduct interviews to meet and speak with the candidates personally. The final decision will be based on which candidate best meets qualifying factors, as well as the expectations of all guidelines as put forth by Goulds Recreation, in affiliation with SNL. Goulds Recreation will approve all head coaches for community teams. Assistant coaches and managers will be decided with input from the head coach.

Qualifying Factors:

All factors are considered as a whole. A review will be conducted of any past documented incidents that may have affected our association positively or negatively. Qualifying factors include but are not limited to:

- 100% SUPPORT, ACCEPTANCE AND ADHERANCE TO GOULDS RECREATION AND SNL RULES AND REGULATIONS
- DEGREE TO WHICH YOU ARE A POSITIVE BEHAVIORAL ROLE MODEL FOR PLAYERS
- HISTORY OF CONFRONTATION AND LACK OF ON AND OFF FIELD PROBLEMS
- EXPERIENCE
- TRAINING (Agree to obtain or begin the process of obtaining the appropriate certification for the position applied for as set forth by the Board of Directors of SNL.

By tending my signature, I acknowledge that I have read the above statements and agree to all terms. Failure to uphold the standards as stated above could result in my immediate removal from any assigned coaching/assistant coaching/managing position.

I certify that all statements on this application are true and complete. I understand that false statements on this application shall be considered sufficient reason for rejection of application or termination of a volunteer agreement. I also do hereby grant and authorize Goulds Recreation the right to access information contained in this application and give permission to do a criminal history background check. All information contained in this application is solely for the use of Goulds Recreation, will only be released to SNL if necessary and will not be released to any other entity.

Signature: _____ Date: _____

Please email completed applications to: gouldsrecreation@gmail.com or call us at 745-7575 to set up a drop-off time.

TO BE COMPLETED BY GOULDS RECREATION ASSOCIATION

APPROVED: yes no

ASSIGNED TO TEAM: _____

DATE APPROVED: _____

SIGNATURE OF Chairperson: _____

SIGNATURE OF Recreation Coordinator: _____