PETERBOROUGH CITY SOCCER ASSOCIATION



TEAM OFFICIAL APPLICATION FORM

Applicant Name and Contact Information						
Name:		Tel: (home)				
Street:						
City:		Cell:				
Postal Code:	E-Mail:					

Section A: Position Preferred							
Head Coach 🖌	Assistant Coach 🛛		Manager 🛛	Assistant Manager 🛛			
1 st Choice Team:	Girls 🛛	Boys 🛛	Age Group:				
2 nd Choice Team:	Girls 🛛	Boys 🗖	Age Grou	p:			

Section B: Coaching Qualifications*

Grassroots & Competitive: FUNdamentals 🛛 Learn to Train 🖵 Soccer for Life 🖵 G'roots Diploma 🖵

Optional Additional Certification: Canada A-, B-, C- Diploma 🗖, Goalkeeper Certificate or Diploma 🗖

Mandatory for all ages: MED , RIS , Making Headway , EAP , Rule of Two

* Minimum qualifications to be eligible to coach are:

U6 - U8: FUNdamentalsU9 - U12: Learn to TrainU13 - U18 and Senior: Soccer for LifeAll coaches and assistant coaches must have Make Ethical Decisions (MED), Respect in Sport (RIS), MakingHeadway, Emergency Action Plan (EAP) and Rule of Two.

Certification must be valid (not expired) until the end of the season. Coaching Courses will be available in the spring before the start of the outdoor season; the club will reimburse the cost (conditions apply).

Section C: Coaching Experience

If you have coached within the past three years, please indicate (i) Season (ii) The Club; (iii) Age Group/Gender; (iv) League/Division, starting with the most recent season.

Year/Club/Team:

Year/Club/Team:

Year/Club/Team:

NOTE: A resume (esp. if you're new to the club) outlining your qualifications for this position may be attached.

	Section D: Application Requirements						
1.	A photoc	opy of your coaching certificates may	be requested.				
2.	A current police records check is a <u>REQUIREMENT</u> of this position.						
3.	3. Personal References (3):						
	a)	Name:					
		Address: Telephone:					
	b)	Name:					
		Address: Telephone:					
	c)	Name:					
		Address: Telephone:					
4.	4. A personal interview may be required as part of this application process.						
5.		es may be required to conduct or outli	ne a practice session as part	of this application			
	process.	This application is submitted	and held in confidence				
Section E: Declaration I have reviewed and agreed to the role and position (as defined) and have completed this application accurately.							
Signat	Signature — Date						
<u>Return To:</u>		For Club use only					
Fill out, scan and email copy to the PCSA Director of Coaching at : doc@pcsasoccer.com		and email copy to the PCSA		Date Received			
		baching at :	Application				
		@pcsasoccer.com	Photocopy of Qualifications				
on or before the application deadline		he application deadline	Police Records Check				
			Personal Reference Check				
			Interview				
			Practice Session				
			Coaching Code of Conduct				
1			Resume				