QUINTE SKYHAWKS FOOTBALL CLUB

Coaching Application 2023



All applications should be sent to the Head Coach at

coachmellor@skyhawksfootball.ca

COACHES INFORMATION

Name:	DOB:	, 	1 1		
Address:	Post	al c	code:		
Phone: (Hm):	(Wk):		Mobile	ə:	
Email Address:					
Do you have your NCCP (coaches certificatior	٦Ş	YES	_ NO	
If so what is your number =	#				
If not would you be willing YES NO	to get your certifica	oitĸ	on prior to this	season	JŚ
Have you participated in coaching? YES NO _					
Can you commit up to 2 - season? YES NO					
Completion of training for	· Concussions in Yout	h S	Sports Making	j Headv	vays:
YES NO					
Safe Contact:					
YES NO					



I am interested in coaching: (you can circle more than one; or if your not sure just put what your preference is O or D)

OFFENCE	QUARTERBACKS	RUNNING BACKS	RECEIVERS
DEFENCE	DEFENSIVE LINE	LINEBACKERS	DEFENSIVE BACKS
SPECIAL TEAMS	KICKING	OFFENSIVE LINE	

Please circle your football and coaching experience (position/years)

Played High School Football	Played College Football	Played Semi Pro	Played Pro
Coached Minor	Coached High	Coached College	Other:
Football	School	Football	

List any other involvement with football: _	

Note: All final applicants are subject to a criminal record and vulnerable record check (letter included in this Please note that all coaches associated with Skyhawks Football must have a valid police check completed and a copy submitted to the organization prior to approval. See following page.

