

High Performance Programme Coaching Roles 2015

Application Form

| 1. Contact Det | ails | | |
|----------------|------|---|-------|
| Full Name: | | | |
| Date of Birth | | | |
| District | | | |
| Current Club | | | |
| Postal Address | | | _ |
| | | | _ |
| | | | |
| Phone/Mobile | | _ | |
| Phone/Home | | _ | |
| Phone/Work | | _ | |
| Fax | | | |
| Email/Home | | | |
| Email/Work | | | _ |

| 2. Coaching Positions | | | | | | | | |
|---|-----------------------------|------------------------|----------|--|--|--|--|--|
| Please indicate all positions which you are interested in applying for: Lead Junior Development Squad Coach Lead Coach/Manager – Elite Junior Boys Squad and World Junior Men's Team Lead Coach/Manager – Elite Junior Girls Squad and World Junior Women's Team Lead Coach Oceania Junior Championships and Trans-Tasman Test Series World Women's Team Manager | | | | | | | | |
| 3. Coaching Information | | | | | | | | |
| Please list your current coaching qualifications and key contributions to High Performance Coaching in New Zealand and overseas. Please also include playing experience at HP levels. Please attach extra pages if needed. | | | | | | | | |
| Date | Qualification /Contribution | Impact on HP Community | Comments | | | | | |
| | | | | | | | | |

4. Expectations of the role Please provide your thoughts as to what you believe are the expectations of the roles you are applying for and the commitments that it entails. Please attach extra pages if needed.

5. Adding Value Please provide details as to what skills you bring to the role and how you might add value to the High Performance Program. Please attach extra pages if needed.

| 6. | Referees | | | | | |
|---------------------------------------|--|--|-------|---|--|--|
| Name and Contact Details of Referee 1 | | | | | | |
| Na | ame . | | | _ | | |
| Сс | ontact Phone | | | _ | | |
| Εſ | Mail _ | | | - | | |
| Na | ame and Contact De | tails of Referee 2 | | | | |
| Na | ame . | | | _ | | |
| Co | ontact Phone | | | _ | | |
| Εſ | E Mail | | | | | |
| | | | | | | |
| 7. | Signature | | | | | |
| In | In signing this application I confirm that the above information is correct. | | | | | |
| Się | gned: | | Date: | | | |
| | | | | | | |
| Ch | eck List | | | | | |
| 1 | Full Contact Details | | | | | |
| 2 | Coaching Positions | | | | | |
| 3 | Coaching Information | | | | | |
| 4 | Expectations of the Role | | | | | |
| 5 | Adding Value | | | | | |
| 6 | Referees | | | | | |
| 7 | Signature | | | | | |
| 8 | Return completed form to 4:00pm Friday 25 th Septer | sam@squashnz.co.nz prior to mber 2015 | | | | |