Whaler Nation ●1416 Stephanie Way ● Chesapeake, VA 23320

Whaler Nation
TEAM MANAGER APPLICATION

PERSONAL INFORMATION

Name _____
First Middle Last Other Name(s) Used

Address _____
Street

_____
City State Zip Years at this address

State(s) of Residence for Past Ten Years _____

Home Phone _____ Business Phone _____

Cell Phone _____ Email Address _____

Date of Birth: _____ Social Security No. _____
MM/DD/YYYY

Drivers License # _____State _____

Current Employer
and Position _____
Company Name Position

Business
Address _____
Street

_____
City State Zip

Manager's
Name _____Years with this Company _____

Percentage of required business travel in your job _____

Volunteer, community, charitable and/or other unpaid experience
(Name of organization(s), address, phone, and role/services providing/provided)

_____
_____
_____
_____
_____

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BACKGROUND INFORMATION

Have you ever been convicted of, or pleaded guilty to, a crime (including crimes for which the record has been expunged, or to which you pleaded no contest)? Yes _____No_____

If yes, date of conviction or plea _____State_____

Describe Circumstances _____

_____

Have you ever been subject to any court order involving any sexual abuse or physical abuse of a minor, including but not limited to a domestic order for protection? Yes ____No_____

If yes, please explain _____

_____

_____

Have your parental or guardian rights ever been terminated? Yes _____No_____

If yes, please explain _____

_____

_____

Have any complaints ever been made against you either at work, or in your capacity as a volunteer, that you sexually or physically abused a minor? Yes _____ No _____

If yes, please explain _____

_____

_____

Do you have a history of any behavior that might make you a danger to any child/youth/adolescent in this hockey program? Yes _____No_____

If yes, please explain _____

_____

_____

Have you ever had disciplinary actions taken/membership terminated by a youth hockey organization for violating the USA Hockey Zero Tolerance policy and/or any Codes of Conduct for that organization? Yes _____No_____ If yes, please explain

_____

_____

_____

Is there anything else in your background that you would like to share for consideration by Whaler Nation in your potential selection as a coach?

_____

_____

_____

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Do you have a child/children who will be trying out for travel ice hockey in the season for which you are applying for a coaching position?
Yes _____No_____ If yes, what age bracket(s)? _____

REFERENCES

Please provide three references as part of an applicant screening process to ensure the safety of our players, and in accordance with USA Hockey guidelines.

Name	Address	Phone	Relationship

ADDITIONAL QUALIFICATIONS, COMMENTS, REMARKS

_____
_____
_____
_____
_____
_____

Note: If more room is required, attach resume or additional information to the completed application form.

Applicant's Statement, Authorization and Release of Liability

I certify that all information given by me in this application is true and correct to the best of my knowledge. I understand that false or misleading statements made by me or consequential omissions of any kind in the application process will be sufficient cause for my not being accepted as a coach, or for my dismissal no matter when discovered. I authorize Whaler Nation to investigate all information contained in this application. The employers, organizations and individuals named are authorized to give Whaler Nation any and all information regarding my employment, volunteering, character, fitness and qualifications (including opinions) that they may have about me. In consideration of the evaluation of this application by Whaler Nation, I hereby waive, release and discharge Whaler Nation, USA Hockey, all employers, organizations, and individuals, and any other persons or entities from liability for all damages and losses of whatever kind or nature, except liability for willful or intentional acts or punitive damages, that may result from compliance or attempts to comply with this. I acknowledge that I am subject to a criminal background check to be done by the Potomac Valley Hockey Association (PVAHA) with which Whaler Nation is affiliated. I further acknowledge that I must meet the minimum coaching requirements as set forth by USA Hockey (and Whaler Nation, as applicable) to be considered for any coaching position with Whaler Nation.

_____ _____

Signature Date

Submit this completed application to:

Brad Jones, Whaler Nation Director- brad@chilledponds.com (757) 420-4488