

Cochrane Crush Baseball Head Coach Application

Applicant Name:	
Address:	
Street:	County:
City:	Postal code:
Country:	Cell:
E-Mail:	

<u>Role</u>

Head Coach - Cochrane Crush Baseball – 13U, 15U or 18U (circle one or multiple)

Position Responsibilities

To coach, develop and mentor our athletes in accordance to the policies and codes of conduct of Cochrane Minor Baseball Association. Adhere to the schedules and attend tournaments set forth by CMB and Baseball Alberta.

Qualifications:

Applicants must have a strong knowledge of the game of baseball. Applicants that have played or coached at a college or university level would have a strong advantage.

Start Date: February 2023

Submission Deadline: December 16, 2022

Coaching Conduct

In the last five years as a coach, manager, or parent, have you ever been removed or ejected from a youth sports game or activity by the umpires or officials, or have you been suspended from your youth coaching/managing duties by the local, state or National governing youth sports organizations or athletic association?

Circle or highlight one: YES NO	(If yes, please explain in detail on a separate sheet)
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Coaching Qualifications, Philosophy and Season Plan

Please provide additional information (via addendum to the current application or a separate form) in the following areas:

- Explain qualifications and reasons for interest in coaching Cochrane Crush Baseball
- Explain your definition of success as an AA or AAA baseball team •
- Explain your approach to communicating with parents and handling issues •
- Explain your approach to utilizing assistant coaches •
- Explain your criteria for selecting players
- Explain your approach to developing your players (developing skills, playing time, discipline, handling pitchers, etc.)
- Explain your approach to making practice time effective, feel free to attach a practice plan
- Any other information you feel is critical to CMB's decision making process •

Coaching References

Provide three references that we can contact with regards to your coaching background and experience. (At least one must be from a coach that you have never coached with)

Name	Phone	How You Know Person

Signature: _____ Date: _____

Submission Instructions

Please submit this application and any additional documents to admin@cochraneminorball.ca

Thank you very much for your interest in joining the Cochrane Crush Baseball Program!