



**CHRISTCHURCH
NETBALL CENTRE**

Pūtahi Poitarawhiti ki Ōtautahi

'Catch Netball's Challenge'

**REPRESENTATIVE TEAM ASSISTANT or CO-COACH
APPLICATION FORM**

By completing this form you are registering your interest in applying for the position of Assistant or Co-Coach of the following team(s). (Delete whichever is not applicable)

Under 19 Under 17 Under 16 Under 15

Please indicate whether you wish to be involved in team selection process Yes/No

NAME: _____

ADDRESS: _____

Phone No: _____ (home) _____ (work) _____ (mobile)

Email address: _____

Do you hold a full clean & current NZ Drivers Licence: Yes/No

Are you eligible to drive a rental vehicle (ie over 25 years of age) Yes/No

Please list your Netball New Zealand Coaching Qualifications and the years they were attained. Also outline any other relevant qualifications/experience:

Please detail your coaching career with Representative and Club teams:

What is your motivation for applying for this position?

What is your philosophy about selecting players?

How do you see Assistant or Co-Coach (delete whichever is not applicable) working alongside a Team Coach (Head Coach)?

What do you see as your coaching strengths or skills?

What do you see as your weaknesses and how would you envisage requesting or requiring assistance in this area?

What do you envisage the role of a Team Manager is?

- I understand that if I am appointed to the role of a representative Assistant or Co-coach, that for the duration of my appointment I also join and become an active member of the Centre's Coaching and Development Committee.
- I understand that if also appointed as a selector that I will be available all day for the days stipulated to be utilised for player selections to attend trials and that if I am a player/coach that I will be required to abstain from my club duties during those days.
- I am available for all Coaching duties from **May – September 2012**.
- I am aware and agree to being subject to a NZ Police Vet as to my suitability to take a team away from Christchurch
- By signing this application for a representative team position I confirm that the above information supplied by me is true and correct.

Signed: _____

Please list one referee and his/her full contact details.

Name: _____

Address: _____

Phone: _____ Email: _____

Signed: _____

**Return completed and signed application together with any supporting information to:
Netball Development Coordinator
Christchurch Netball Centre
P O Box 9318
Christchurch
by 25 February 2012**