

NOMINATION FORM

Please print clearly

Please note: That family members are ineligible to nominate coaches

Name of Coach: _____ City/ Town _____
Address: _____ Email: _____
Postal Code: _____ Phone: _____
CC#: _____ Respect in Sport #: _____
Sport: _____ Age of Athletes: _____

Gender: Female or Male or Co-Ed

Level of Team: Club/ School/ Other: _____

Long Term Athlete Development (LTAD): (select one)

Active Start/Fundamentals or Learn to Train or Train to Train or Train to Compete or Train to Win

How long has the coach been coaching this team? _____ How many times a week does the coach meet with athletes? _____

Please answer the following questions:

What contributions has the coach made to sport? Please provide specifics on the following:

Indicate any areas where the coach has contributed to the sport they coach, such as presentations, NCCP clinics or committee involvement.:

How has the coach's team/athletes demonstrated improvement: (ex. Skill development, confidence, etc.)

How has the coach demonstrated leadership and integrity? Provide specifics: (ex. Treatment of officials, professionalism, respect for the rules, etc.)

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How has the coach demonstrated concern for the all-round development of their athletes?

Overall why do you think this coach should be selected?

Nominator's Name and Contact Information

Nominator's Name: _____

Daytime Phone Number: _____

Postal Code: _____

E-mail: _____

Address: _____

City: _____

What best describes your relationship with the coach:

Additional Reference

Name: _____

Phone Number: _____