

Having trained coaches is the key for the development of our players.

Any individual wishing to take training is encouraged to do so. In order to receive a reimbursement from South Stormont there are a few things that must be done.

1. Research the training you would like to attend. Find out the location, price and deadline to register.
2. Complete the training application form. See attached completed form. The forms are available in the window at the arena or you can contact your convener.
3. This form must be given to your convener
 - a. IP – Kim Height – k.height@ssmha.net
 - b. House League – Barry Height – b.height@ssmha.net
 - c. Rep Convener – Currently Vacant – Therefore give all forms to Paul Huntley – President – p.huntley@ssmha.net
4. The convener reviews the form for the following:
 - a. Are you a registered coach, assistant coach, trainer etc with any team in our association?
 - b. Is the training you are applying for pertinent to your current role within your team? **(If the training is for future positions the training will not be reimbursed at this time – You have the option of re-apply when the training is a requirement of your position and your reimbursement will be considered)**
 - c. Is the training reasonable priced?
 - d. Do we have enough money in our budget to send you to this training?
 - e. If the answer is yes to the above questions the convener signs your application and forwards it to the president.
 - f. Once the president signs this form he/she will inform the convener that the form is signed.
 - g. The convener will inform you that you are approved to take this training.
 - h. You would book your training with the training facility.
 - i. Once you return you would put your receipt for the training in the window at the arena for the treasurer to pick up.
 - j. A check will be issued to you for the amount of the training costs.

NOTE: YOUR TRAINING WILL NOT BE REIMBURSED IF THE APPLICATION FORM IS NOT SIGNED BY THE CONVENER AND THE PRESIDENT PRIOR TO THE TRAINING DATE.



South Stormont Minor Hockey Association - South Stormont Selects

APPLICATION FOR TRAINING

Name _____

Title of Training _____

Sponsored by _____

Date(s) _____ Registration Deadline _____

Description on Training _____

Personal Objective _____

Benefit to South Stormont _____

Registration Fee \$ _____

In applying for permission to attend this training, I understand and will comply with all relevant SSMHA policies and procedures.

I understand that without signed approval to attend training by the President or alternate any training I attend will be at my expense.

Signature _____ Date _____

Received by _____ Date _____

Comments: _____

Approved by _____ Date _____

(President or Alternate)

Last Revised December 2006