



HOCKEY CANADA INSTRUCTIONAL STREAM CERTIFICATION SEMINAR SKILLS COACH - APPLICATION FORM

Winsport / Canada Olympic Park, Calgary, Alberta, June 21 – 26, 2026

Name: _____

Address: _____

City: _____ Province: _____ Postal Code _____

Main Phone #: _____ Email: _____

NCCP – CC#: _____ HCR #: _____

Member (Branch): _____

Coaching Certification – If applicable:

Development 1: Year Completed: _____

High Performance 1 Certification: Year Completed: _____

Coaching / Instructing Experiences:

Season	Organization/Team	Age Level(s)	Role
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



List the reasons why you wish to attend the Instructional Stream Certification Seminar:

What are your expectations of the Instructional Stream Certification Seminar?

What will you be able to do with the information and knowledge gained from the seminar and experience?



Please provide the names, addresses and phone numbers of at least two references familiar with your coaching / instruction background.

Reference 1

Name: _____

City: _____ Province: _____

Main Phone #: _____ Email: _____

Reference 2

Name: _____

City: _____ Province: _____

Main Phone #: _____ Email: _____

In addition to your application you must also enclose a letter of recommendation from a team (current or past) or association as well as video clips of you on ice working with players. The clips should focus on the areas below:

- 1) Skating / Skills (puck control / passing / shooting - including position specific skills ie forward or defence)

The video can be sent in via Drop Box, YouTube links, external memory drive / stick or any other method you currently use. There is no specific length of video required but it must be of good quality and significant enough to show your skills on ice in performing and teaching the above skills.

Please return this application **prior to end of day on Friday, February 20, 2026.**

Attention: **Corey McNabb, Director, Next Gen Development**
201 – 151 Canada Olympic Road, SW
Calgary, AB, T3B 6B7
cmcnabb@hockeycanada.ca
Telephone: 403-777-4593