

# NEW ZEALAND ICE HOCKEY FEDERATION

## NATIONAL TEAM STAFF APPLICATION FORM



NAME _____ ADDRESS _____ _____ _____	HOME PHONE _____ MOBILE PHONE _____ EMAIL _____
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NATIONAL TEAM APPLIED FOR: SENIOR MEN (ICE BLACKS) <input type="checkbox"/> SENIOR WOMEN (ICE FERNZ) <input type="checkbox"/> U20 MENS <input type="checkbox"/> U18 MENS <input type="checkbox"/> U18 WOMENS <input type="checkbox"/> U16 MENS <input type="checkbox"/>	POSITION APPLIED FOR: HEAD COACH <input type="checkbox"/> ASSISTANT COACH <input type="checkbox"/> TEAM MANAGER <input type="checkbox"/> ASSISTANT MANAGER <input type="checkbox"/> MEDICAL OFFICER <input type="checkbox"/> EQUIPMENT MANAGER <input type="checkbox"/>
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DESCRIBE WHY YOU ARE INTERESTED IN THIS POSITION:

DESCRIBE WHAT YOU HAVE TO OFFER TO THE TEAM:

GIVE A BRIEF RESUME OF YOUR RELEVANT EXPERIENCE/QUALIFICATIONS:

Please return this application form by the advertised date to Kyle Matthews, International Vice-President. Email [kyle.matthews@nzicehockey.co.nz](mailto:kyle.matthews@nzicehockey.co.nz).