



Learning Facilitator Application Form

Candidate Request

To: BC Soccer Coaching Development Department

Date: _____

I, _____ am the _____ for _____ am
First and Last Name Position/Role Organization Name

requesting BC Soccer to consider the following candidate to become trained for our organization as an in-house Learning Facilitator (LF). This request is based on fulfilling our requirement to certify our coaches with the following coaching inventory and potential dates:

| COURSE TYPE | # OF COACHES | # OF COURSES | POTENTIAL DATES |
|-----------------|--------------|--------------|-----------------|
| Active Start | | | |
| Fundamentals | | | |
| Learn to Train | | | |
| Soccer for Life | | | |

DISCLAIMER: I understand that if this request is approved, once the candidate is trained, he/she will be responsible to schedule and coordinate his/her availability to deliver the respective courses for our organization. I also acknowledge that our courses may not get approved if the trained in-house LF does not make him/herself available. I confirm that the information provided below is correct and that the named candidate has been informed of the expectations of this letter.

Candidate Profile:

First and Last Name Position/Role Email Address

Application requests will only be reviewed if all the following criteria has been met by the candidate:

- Is a resident of British Columbia.
- Has submitted a valid Criminal Record Check with our organization.
- Has completed the NCCP LF Core Training. NCCP # _____
- Has passed the NCCP Making Ethical Decisions online evaluation.
- Minimum Provincial B License (or Canada Soccer approved equivalency)
- Minimum 10 years coaching experience.

Sincerely,

Signature

Please email conorsmith@bcsoccer.net