LITTLE CAESARS

DEVELOPMENT LEAGUE

Coaching Interest Form

Thank you for your interest in coaching with the Little Caesars Development League. Please complete the following form to provide our hockey operations staff with information about your coaching background, philosophy, and interest.

COACH INFORMATION

First Name:	Last Name:
Email:	Phone:
City:	State:
Current Organization:	Current Position / Title:
Years of Coaching Experience:	Years Coaching AAA / Elite Hockey:

Team(s) of Interest: ☐ 15U ☐ 17U ☐ Either

Position(s) of Interest: ☐ Head Coach ☐ Associate Head Coach ☐ Assistant Coach

☐ Other (skills, skating, strength/conditioning, video/analytics)

_____

COACHING BACKGROUND

Please summarize your coaching experience, including previous teams and organizations.

_____

_____

_____

_____

List your coaching certifications, licenses, or relevant professional development have you completed?

What experience do you have developing players for higher levels of hockey?

COACHING PHILOSOPHY

How would you describe your coaching philosophy and approach to player development?

Describe how you balance winning with individual player development?

In what ways do you establish standards for accountability, effort, and team culture?

How do you approach communication with players, parents, and other staff members?

DEVELOPMENT LEAGUE INTEREST

Why are you interested in coaching with the Little Caesars Development League?

Explain your strengths, experience, or perspective that you would bring to our program?

What are your long-term coaching and professional goals?

AVAILABILITY AND COMMITMENT

The Development League requires a significant commitment from coaches, including practices, games, travel, communication, and collaboration across the organization.

Are you able to meet the time and travel commitments required? ☐ Yes ☐ No ☐ Need to discuss

Please identify any scheduling, work, travel, or other commitments that may affect your availability.

REFERENCES

Reference 1 — Name / Relationship:	Phone / Email:
Reference 2 — Name / Relationship:	Phone / Email:
Reference 3 — Name / Relationship:	Phone / Email:

ADDITIONAL INFORMATION

Is there anything else you would like the Little Caesars hockey operations staff to know?

HOCKEY OPERATIONS USE ONLY

Date Received:	Reviewed By:
Interview Status: ☐ To Schedule ☐ Scheduled ☐ Completed	Candidate Status: ☐ Follow-Up ☐ Recruiting Target ☐ Offer / Invitation ☐ Not Pursuing

Evaluation Notes:

Thank you for your interest in the Little Caesars Development League.

Our program is committed to player development, high-level coaching, competition, accountability, and a winning tradition.