### **BBHV Application Form**



Thank you for expressing your interest in applying for a role with Basketball Hutt Valley. All candidates are required to complete the following application. Please fill out & return a signed copy to us at: josh.bbhv@gmail.com

Personal Information				
First Name			Date of Birth	
Surname			Gender (Optional)	
Address				
Town / Suburb				
City			Postcode	
Contact Phone	Mobile:		Home Phone:	
Email Address				
Pre-existing (	Conditions			
Do you have an injury or medical condition caused by gradual process, disease or infection, such as repetitive strain injury, which the tasks of this job may aggravate or contribute to?  YES / NO				
If you answered "yes", please describe:				
Background (	Checking Info	rmation		
•		this position, we comp answer the following	-	ecks as a part
	uding any driving offer	ges, or are awaiting the laces) that may result in c		YES / NO
All roles defined as 2014 require full disc	closure of convictions a	orkers under the Vulnera as Section 19(3) of the C ons apply	able Childrens Act lean Slate Act 2004	1207110
If you answered " <b>yes</b>	", please describe:			

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Relevant Qua	lifications & I	raining		
	Do you l	have the relevant quali	fications for this role?	YES / NO
Have you completed any relevant training for this role?			YES / NO	
If you answered " <b>yes</b> '	', please describe:			
Relevant Skill	s & Experienc	e		
Team				
Role/Position			Year	
What were your key a responsibility?	areas of			
Team		_		
Role/Position  What were your key a responsibility?	areas of		Year	
T				
Team  Rela/Resition			Year	
Role/Position  What were your key a responsibility?	areas of		Tear	

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## **Roles & Responsibilities**

		Which role	are you applying for?	Please Circle
Staff	Head Coach	Assistant Coach	Team Manager	Other
Specialist	Tour Director	Physiotherapist	Trainer	Other
Officials	Referee	Score bench	Floor Controller	Other

	V	/hat area do you want t	to be responsible for?	Please Circle
Representatives	Development	U13s	U15s	U17s
	U19s	U23s	Para	Other
Leagues	Adults	Youth	Intermediate	Primary
	Which (	gender group do want t	to be responsible for?	Male / Female / Diverse

# Acknowledgment (Please tick)

I agree to abide by all of BBHV Codes of Conduct, policies & procedures
I understand and accept that my appointment to a role is conditional to the screening and completion of a police vetting check
I understand and accept that my application for a role will be reviewed and recommended by the appropriate Sub-Committee, with the final decision to be approved by BBHV executive committee.
I understand and accept that all team selections will be approved by the association's executive committee before they are finalised and then announced
I understand and accept that being appointed to a role will be for a term that is agreed by the BBHV Executive Committee
I understand and accept that the role I am applying for is voluntary

By signing this application, I certify that all information on this form is true and correct to the best of my knowledge.

Full Name:	
Signature:	Date: