MUSEUMS ASSOCIATION OF SASKATCHEWAN

COACHING PROGRAM APPLICATION FORM

Name:_____

Institution:_____

Address:_____

City:_____ Postal Code:_____

Tel:_____ Fax:_____

Email:_____

Website:_____

1. Describe the challenge or opportunity in your job or for your institution that you want to focus on in this program.

2. What background or experience do you and your staff have in your institution in this particular area?

3. Who have you identified as a potential coach to assist you in addressing this challenge/opportunity? Have you had a preliminary conversation with this individual? (Although MAS recommends that you choose your own coach, MAS will help you find a coach if you are unable to identify an appropriate individual.)

4. Describe the goals/objectives of your institution that you are working toward achieving by addressing this challenge or opportunity.

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5. Describe as specifically as possible what results you hope to achieve **for your institution** with the assistance of a coach.

6. Describe as specifically as possible what results you hope to achieve **for yourself and/or your staff** with the assistance of a coach.

7. When would you like to have the coach on-site at your institution?

Please submit application form via fax/mail to:

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