



**SKATE AUSTRALIA
ARTISTIC COACHING ACCREDITATION
ELITE COACH**

Assessment 2012

Skate Australia
Suite 801
58 Riverwalk Avenue
Robina QLD 4226



COVER PHOTO

Coach: Debbie Mestrinho

Skater: Stephanie Campbell

Bronze Medal Junior Ladies Combined

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SECTION 1: Assessment Check List

This manual contains all the paperwork necessary to be assessed and submit an Artistic Elite Coach accreditation application. In order to submit a new Artistic Elite accreditation or reregistration of a lapsed accreditation, **ALL** elements in this checklist **MUST** be completed prior to submitting the paperwork.

Applicant coaches are responsible for maintaining their own copy of ALL paperwork. To ensure the applicant coach has the ability to re submit, originals should NOT be submitted.

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Intermediate coaching general principles completed. Can be done online through SEAL website (www.sealglobal.net) or other approved suppliers. Copy of certificate must be submitted. |
| <input type="checkbox"/> | Practical Modules completed or RCC obtained Every practical module must either be signed off as completed or a RCC obtained for the module. |
| <input type="checkbox"/> | Workbook completed and signed Workbook questions must all be answered and signed by examiner |
| <input type="checkbox"/> | Practical Hours completed and signed Copy of signed practical hours must be submitted. Must be signed by examiner or delegate. |
| <input type="checkbox"/> | Code of Ethics Signed Copy of signed code of ethics must be submitted. Must be dated at time of submission. |
| <input type="checkbox"/> | Skate Australia Membership Fee Paid and current Applicant must be a current registered member of Skate Australia. |
| <input type="checkbox"/> | Skate Australia Accreditation Registration Fee Paid Registration fee of \$25.00 must be paid for course to be registered. |
| <input type="checkbox"/> | Coaches Insurance Fee Paid Insurance Fee of \$30.00 must be paid or proof of current insurance provided. |
| <input type="checkbox"/> | Application completed All accreditation details must be recorded on the application and it must be signed. |



SECTION 2: Elite Artistic Coach Application

Name:- _____ **- Surname:** _____ **Birth Date:** _____

Address:- _____ **State:** _____

Suburb: _____ **P/Code:** _____

Email: _____ **SA ID No:** _____

Active Member **Non Active Member**

DISCIPLINE: Elite Artistic Coach

| | |
|---|--|
| <input type="checkbox"/> NEW ACCREDITATION | <input type="checkbox"/> ADDITIONAL ACCREDITATION |
| <input type="checkbox"/> General Principles Certificate (<i>Attached</i>) | |
| <input type="checkbox"/> Assessment sheets for accreditation | |
| <input type="checkbox"/> Written Exam | |
| <input type="checkbox"/> Practical Hours | |
| <input type="checkbox"/> Signed Code of Ethics (<i>Attached</i>) | |
| <input type="checkbox"/> Signed Final Review (<i>Attached</i>) | |
| <input type="checkbox"/> Course Registration Fee (\$25.00) | Date paid to SA ____/____/____ |
| <input type="checkbox"/> Coaches Indemnity Insurance (\$30) | Date paid to SA ____/____/____ |

Examiner: _____ State: _____

Examiner's Qualification _____ Accreditation Expiry ____/____/____

Presenters Course YES / NO

Approved by State Chair of Coaching

Name _____

Signed _____ Date: ____/____/____

Approved by National Chair of Coaching

Name _____

Signed _____ Date: ____/____/____

Competency Achieved Expiry Date: ____/____/____

Entered onto Database by National Accreditation Officer Date: ____/____/____



SECTION 3: Workbook

This is an open book assessment, all course resources are available during examination.

All questions for the relevant discipline **MUST** be completed and answered correctly in order to pass this workbook. Any incorrect answers should be reviewed with examiner and then re answered by participant. There are 5 questions per discipline

Participant may make as many attempts as required to pass the workbook.

NAME: _____

DATE: _____

1. Figures: Name the figures in the 1st gold bar test and the passing total for this test.

2. Figures: Name the figures in the 2nd gold bar test and the passing total for this test.

3. Figures: Name the figures in the 3rd gold bar test and the passing total for this test.



4. Figures: Name the figures in the 4th gold bar test and the passing total for this test..

5. Figures: Name the figures in the gold medal test and the passing total for this test.

6. Dance: Name the Dances in the 1st gold bar solo dance test and the passing total for this test.

7. Dance: Name the Dances in the 2nd gold bar solo dance test and the passing total for this test.

8. Dance: Name the Dances in the 3rd gold bar solo dance test and the passing total for this test



9. Dance: Name the Dances in the 4th gold bar solo dance test and the passing total for this test

10. Dance: Name the Dances in the gold medal solo dance test and the passing total for this test

11. Freeskate: Name the requirements in the 1st gold bar test and the passing total for this test.

12. Freeskate: Name the requirements in the 2nd gold bar test and the passing total for this test.

13. Freeskate: Name the requirements in the gold medal test and the passing total for this test.



14. Freeskate: List the items you would use for a first gold bar proficiency test in order of skating.

15. Freeskate: List the items you would use for a second gold bar proficiency test in order of skating.

ASSESSOR ONLY (A mark of 100% is required for a pass of this test)

MARK: _____ / 5

PERCENT: _____ PASS / FAIL

EXAMINER: _____

SECTION 4: Recognition of Prior Learning

| ADVANCED ARTISTIC COACH – RPL APPLICATION FORM | | | | | |
|--|---|---------|--|------------------------------|--|
| SECTION 1 – Personal Details | | | | | |
| Name: | | | | Date of Birth: | |
| Address: | | | | State | |
| Address: | | | | Postcode: | |
| Phone: | | Mobile: | | SA ID No: | |
| Email: | | | | | |
| SECTION 2 – Evidence (Compulsory) | | | | | |
| Module / Unit Name | Learning Outcomes | | | Summary of evidence provided | |
| Unit 2 Specific Skills Elective – Singles 1 | <ul style="list-style-type: none"> Understand how to teach the specific skills related to Camel Spins in artistic roller skating. Identify skill faults and correct technique for the specific skills related to Camel Spins in artistic roller skating. Specific ability to teach Inverted Camel, Layover Camel, Heel Camel and Broken ankle Camel spins. | | | | |
| Unit 3 Specific Skills Elective – Singles 2 | <ul style="list-style-type: none"> Understand how to teach the specific skills related to Sit Spins in artistic roller skating. Identify skill faults and correct technique for the specific skills related to Sit Spins in artistic roller skating. Specific ability to teach Jump sit spin, jump sit – jump change sit spin, Camel sit change camel spin and Camel jump change sit combination spin. | | | | |

| Module / Unit Name | Learning Outcomes | Summary of evidence provided |
|--|--|------------------------------|
| Unit 4 Specific Skills Elective – Singles 3 | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Toe Jumps in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Toe Jumps in artistic roller skating. • Specific ability to teach Triple mapes, Double mapes combination, Double Lutz Combination and Double Flip combination. | |
| Unit 5 Specific Skills Elective – Singles 4 | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Edge Jumps in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Edge Jumps in artistic roller skating. • Specific ability to teach Double Axel Jump, Double Boeckl Jump and Triple Salchow Jump. | |
| Unit 6 Specific Skills Figures 1 | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Three Turns in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Three Turns in artistic roller skating. • Specific ability to teach figures 13, 29a/b, 34a/b, 36a/b and 37a/b. | |
| Unit 7 Specific Skills Figures 2 | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Bracket and Counter Turns in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Bracket and Counter Turns in artistic roller skating. • Specific ability to teach figures 33a/b, 40a/b, 41a/b, 22a/b and 23a/b. | |
| Unit 8 Specific Skills Figures 3 | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Rocker Turns and back edge figures in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Rocker Turns back edge figures in artistic roller skating. • Specific ability to teach figures 20a/b, 21a/b, 24a/b and 25a/b. | |
| Unit 9 Specific Skills Figures 4 | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Loop Figures in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Loop Figures in artistic roller skating. • Specific ability to teach figures 31a/b, 35a/b and 39a/b. | |

| Module / Unit Name | | | Learning Outcomes | Summary of evidence provided |
|---|---------------|---|--|------------------------------|
| Unit 10 Specific Dance 1 | Skills | – | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Silver Dance in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Silver Dance in artistic roller skating. • Specific ability to teach dances Dench Blues, Flirtation Waltz, 14 Step, Carroll Swing and Harris Tango. | |
| Unit 11 Specific Dance 2 | Skills | – | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Silver Dance in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Silver Dance in artistic roller skating. • Specific ability to teach dances International Waltz, Imperial Tango, Windmill Waltz and Rocker Foxtrot. | |
| Unit 12 Specific Dance 3 | Skills | – | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Silver Dance in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Silver Dance in artistic roller skating. • Specific ability to teach dances Kilian, Westminster Waltz, Iceland Tango, Pacifica Foxtrot and Argentine Tango. | |
| Unit 13 Specific Dance 4 | Skills | – | <ul style="list-style-type: none"> • Understand how to teach the specific skills related to Silver Dance in artistic roller skating. • Identify skill faults and correct technique for the specific skills related to Silver Dance in artistic roller skating. • Specific ability to teach dances Starlight Waltz, Quickstep, Italian Foxtrot, Paso Doble and Viennese Waltz. | |

SECTION 3 – Declaration (Compulsory)

I declare that the evidence I have provided is a true and accurate record of my educational, work and life experiences;

Signature of Applicant

Date

PAYMENT

Applicants must pay an RPL Administration fee.

Amount Payable:

\$

(Fee will be determined on a case by case basis. As a guide the cost will be approximately \$50.00 per hour required to assess the application. Candidate will be provided with an estimate upon submission.)

| ELITE ARTISTIC COACH – RPL ASSESSOR FORM | | | | Applicants Name: | | |
|---|---|---|---|---|--|----------|
| Learning Outcomes / Assessment Criteria | Evidence Supplied | Validity (Is the evidence relevant to the performance criteria?) | Sufficiency (Is there enough evidence?) | Authenticity (Is the evidence a true reflection of the Candidate?) | Current (Is the evidence recent? Obtained within the last 4 years) | Comments |
| Unit 2 Specific Skills – Singles 1 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Camel Spins in artistic roller skating. Specific ability to teach Inverted Camel, Layover Camel, Heel Camel and Broken ankle Camel spins. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Unit 3 Specific Skills – Singles 2 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Sit Spins in artistic roller skating. Specific ability to teach Jump sit spin, jump sit – jump change sit spin, Camel sit change camel spin and Camel jump change sit combination spin. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Unit 4 Specific Skills – Singles 3 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Toe Jumps in artistic roller skating. Specific ability to teach Triple mapes, Double mapes combination, Double Lutz Combination and Double Flip combination | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| ADVANCED ARTISTIC COACH – RPL ASSESSOR FORM | | | | Applicants Name: | | |
|--|---|---|---|---|--|----------|
| Learning Outcomes / Assessment Criteria | Evidence Supplied | Validity (Is the evidence relevant to the performance criteria?) | Sufficiency (Is there enough evidence?) | Authenticity (Is the evidence a true reflection of the Candidate?) | Current (Is the evidence recent? Obtained within the last 4 years) | Comments |
| Unit 5 Specific Skills – Singles 4 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Edge Jumps in artistic roller skating. Specific ability to teach Double Axel Jump, Double Boeckl Jump and Triple Salchow Jump. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Unit 6 Specific Skills – Figures 1 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Three Turns in artistic roller skating. Specific ability to teach figures 13, 29a/b, 34a/b, 36a/b and 37a/b. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Unit 7 Specific Skills – Figures 2 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Bracket and Counter Turns in artistic roller skating. Specific ability to teach figures 33a/b, 40a/b, 41a/b, 22a/b and 23a/b. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| ADVANCED ARTISTIC COACH – RPL ASSESSOR FORM | | | | Applicants Name: | | |
|--|---|---|---|---|--|----------|
| Learning Outcomes / Assessment Criteria | Evidence Supplied | Validity (Is the evidence relevant to the performance criteria?) | Sufficiency (Is there enough evidence?) | Authenticity (Is the evidence a true reflection of the Candidate?) | Current (Is the evidence recent? Obtained within the last 4 years) | Comments |
| Unit 8 Specific Skills – Figures 3 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Rocker Turns and back edge figures in artistic roller skating. Specific ability to teach figures 20a/b, 21a/b, 24a/b and 25a/b. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Unit 9 Specific Skills – Figures 4 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Loop Figures in artistic roller skating. Specific ability to teach figures 31a/b, 35a/b and 39a/b. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Unit 10 Specific Skills – Dance 1 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Silver Dance in artistic roller skating. Specific ability to teach dances Dench Blues, Flirtation Waltz, 14 Step, Carroll Swing and Harris Tango. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

| ADVANCED ARTISTIC COACH – RPL ASSESSOR FORM | | | | Applicants Name: | | |
|--|---|---|---|---|--|----------|
| Learning Outcomes / Assessment Criteria | Evidence Supplied | Validity (Is the evidence relevant to the performance criteria?) | Sufficiency (Is there enough evidence?) | Authenticity (Is the evidence a true reflection of the Candidate?) | Current (Is the evidence recent? Obtained within the last 4 years) | Comments |
| Unit 11 Specific Skills – Dance 2 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Silver Dance in artistic roller skating. Specific ability to teach dances International Waltz, Imperial Tango, Windmill Waltz and Rocker Foxtrot. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Unit 12 Specific Skills – Dance 3 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Silver Dance in artistic roller skating. Specific ability to teach dances Kilian, Westminster Waltz, Iceland Tango, Pacifica Foxtrot and Argentine Tango. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Unit 13 Specific Skills – Dance 4 <ul style="list-style-type: none"> Understand how to teach the specific skills related to Silver Dance in artistic roller skating. Specific ability to teach dances Starlight Waltz, Quickstep, Italian Foxtrot, Paso Doble and Viennese Waltz. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No | |



ADVANCED ARTISTIC COACH WORKBOOK AND ASSESSMENT



| All performance Criteria Met: (Please tick one) <input type="checkbox"/> Yes <input type="checkbox"/> No (Please provide advice to the applicant of any evidence they still need to supply) | | | |
|---|--|----------------------------------|--|
| Date of Assessment: | | Name of Assessor: | |
| Position | | Contact Number: | |
| Assessors Comments | | Assessors Recommendations | |
| | | | |

SECTION 5: Practical Assessment

SKATE AUSTRALIA ELITE ARTISTIC COACHING COURSE PRACTICAL ASSESSMENT – SPECIFIC SKILLS – SINGLES 1

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

1. Ability to organise a group of skaters into a training session.
2. Ability to provide a safe working environment.
3. Ability to teach correct technique for each item.
4. Ability to correct faults.
5. Ability to communicate with skaters.
6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

Office use Only:

Approved by : _____

DATED: ____ / ____ / ____



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – SINGLES 2**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – SINGLES 3**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – SINGLES 4**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – FIGURES 1**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – FIGURES 2**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |

**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – FIGURES 3**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |

**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – FIGURES 4**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – DANCE 1**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – DANCE 2**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – DANCE 3**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |



**SKATE AUSTRALIA
ELITE ARTISTIC COACHING COURSE
PRACTICAL ASSESSMENT – SPECIFIC SKILLS – DANCE 4**

STUDENT COACH: _____
Given name Surname

SUPERVISING COACH: _____
Given name Surname

SUPERVISORS QUALIFICATIONS: _____

VENUE: _____

DATE ASSESSED: ____ / ____ / ____

Please indicate on a scale of 1 - 10 how well these competencies have been demonstrated.

- 1. Ability to organise a group of skaters into a training session.
- 2. Ability to provide a safe working environment.
- 3. Ability to teach correct technique for each item.
- 4. Ability to correct faults.
- 5. Ability to communicate with skaters.
- 6. Ability to recognise physical limitations of skaters.

In my opinion _____ has / has not completed the required practical coaching in a satisfactory manner.

| | |
|---------------------|---------------------------|
| Office use Only: | |
| Approved by : _____ | DATED: ____ / ____ / ____ |

Appendix A: Coaches Code of Ethics

| | | |
|-----|--|--|
| 1. | Respect the rights, dignity and worth of every human being. | <ul style="list-style-type: none"> ▪ Within the context of the activity, treat everyone equally regardless of sex, disability, ethnic origin or religion. |
| 2. | Ensure the athlete's time spent with you is a positive experience. | <ul style="list-style-type: none"> ▪ All athletes are deserving of equal attention and opportunities. |
| 3. | Treat each athlete as an individual. | <ul style="list-style-type: none"> ▪ Respect the talent, developmental stage and goals of each individual athlete. ▪ Help each athlete reach their full potential. |
| 4. | Be fair, considerate and honest with athletes. | |
| 5. | Be professional and accept responsibility for your actions. | <ul style="list-style-type: none"> ▪ Language, manner, punctuality, preparation and presentation should display high standards. ▪ Display control, respect, dignity and professionalism to all involved with the sport – this includes opponents, coaches, officials, administrators, the media, parents and spectators. ▪ Encourage your athletes to demonstrate the same qualities. |
| 6. | Make a commitment to providing a quality service to your athletes. | <ul style="list-style-type: none"> ▪ Maintain or improve your current NCAS accreditation. ▪ Seek continual improvement through performance appraisal and ongoing coach education. ▪ Provide a training program which is planned and sequential. ▪ Maintain appropriate records. |
| 7. | Operate within the rules and spirit of your sport. | <ul style="list-style-type: none"> ▪ The guidelines of Skate Australia Inc. and the Federation Internationale de Roller Skating should be followed. Please contact your State or National Coaches Committee Chairman for a copy of its rule book and relevant policies, e.g SA Anti-doping Policy, Selection Procedures, SA Anti-Harassment Policy. ▪ Coaches should educate their athletes on drugs in sport issues in consultation with SA's Sports Medicine Commission or the Australian Sports Anti-Doping Agency (ASADA). |
| 8. | Any physical contact with athletes should be: <ul style="list-style-type: none"> ▪ Appropriate to the situation. ▪ Necessary for the athlete's skill development * | |
| 9. | Refrain from any form of personal abuse towards your athletes. * | <ul style="list-style-type: none"> ▪ This includes verbal, physical and emotional abuse. ▪ Be alert to any forms of abuse directed towards your athletes from other sources whilst they are in your care. |
| 10. | Refrain from any form of harassment towards your athletes * | <ul style="list-style-type: none"> ▪ This includes sexual and racial harassment, racial vilification and harassment on the grounds of disability ▪ You should not only refrain from initiating a relationship with an athlete, but should also discourage any attempt by an athlete to initiate a sexual relationship with you, explaining the ethical basis of your refusal. |
| 11. | Provide a safe environment for training and competition. | <ul style="list-style-type: none"> ▪ Ensure equipment and facilities meet safety standards. ▪ Equipment, rules, training and the environment need to be appropriate for the age and ability of the athletes. |
| 12. | Show concern and caution towards sick and injured athletes. | <ul style="list-style-type: none"> ▪ Provide a modified training program where appropriate. ▪ Allow further participation in training and competition only when appropriate. ▪ Encourage athletes to seek medical advice when required. ▪ Maintain the same interest and support towards sick and injured athletes |
| 13. | Be a positive role model for your sport and athletes. | |

***PLEASE REFER TO THE Harassment-Free Sport Guidelines available from Skate Australia or the Australian Sports Commission for more information on harassment issues.**

Coaches should.....

- ◆ Be Treated with respect and openness.
- ◆ Have access to self-improvement opportunities.
- ◆ Be matched with a level of coaching appropriate to their level of competence.

For registration or re-registration to the National Coach Accreditation Scheme (NCAS)

TO: Skate Australia

I, _____ of _____
Full name Address

Address Cont/d Post Code _____

Am seeking registration/re-registration (please tick appropriate) for the following Australian Coaching Council (ACC) qualification(s).

Elite Artistic Roller Skating

I agree to the following terms:

1. I agree to abide by Skate Australia's Code of Ethics
2. I acknowledge that Skate Australia may take disciplinary action against me, if I breach the code of ethics. (I understand that Skate Australia is required to implement a complaints handling procedure in accordance with the principles of natural justice in the event of an allegation against me.
3. I acknowledge that disciplinary action against me may include de-registration from the National Coaching Accreditation Scheme.

Please refer to the *Harassment-free Sport Guidelines* available from the Australian Sports Commission or Skate Australia's Member Protection Policy, if you require more information on harassment issues.

Signature If under 18 parent/guardian signature

Date



Australian Government

Australian Sports Commission

(A copy of code of ethics must be printed on back of this agreement)

Appendix B: Participant Evaluation Form

NAME OF COURSE: Elite Artistic Coach

Please answer questions by circling a response, and offering comments if you wish.

1 To what extent did this course meet your expectations?

Not at all 1 2 3 4 5 Completely

2 Was the balance between practical and theoretical material adequate?

Not at all 1 2 3 4 5 Completely

3 Were the sessions well organised? What improvements are needed?

Not at all 1 2 3 4 5 Completely

4 Comment on the program format? (eg Sessions to eliminate, time allocation, time tabling etc)

Not at all 1 2 3 4 5 Completely

5 Was the course too long / short?

Not at all 1 2 3 4 5 Completely

6 Was the venue suitable to the needs of the course?
Not at all 1 2 3 4 5 Completely

7 Comment on the general abilities of the lecturers / presenter by circling the appropriate number?

| | Poor | Fair | Average | Good | Excellent |
|------------------------|------|------|---------|------|-----------|
| Knowledge of Subject | 1 | 2 | 3 | 4 | 5 |
| Teaching skills | 1 | 2 | 3 | 4 | 5 |
| Planning / Preparation | 1 | 2 | 3 | 4 | 5 |
| Enthusiasm | 1 | 2 | 3 | 4 | 5 |
| Time for questions | 1 | 2 | 3 | 4 | 5 |

Help for specific lecturers / presenters:

8 Are there any further topics you would like to gain competencies in?

9 Was the pre course correspondence sufficient? If NO why?
Not at all 1 2 3 4 5 Completely



10 Was the supervision and feedback of coaching practice adequate?

Not at all 1 2 3 4 5 Completely

11 Was the course useful and relevant?

Not at all 1 2 3 4 5 Completely

12 Do you understand all the procedures involved to complete your accreditation?

Not at all 1 2 3 4 5 Completely

13 What aspect of the course was most helpful and why?

Thank you for completing this questionnaire.



APPENDIX C: Practical Hours Recording Form

My Details are as follows:

Name: _____

Address: _____

_____ Post Code: _____

E-mail Address: _____

Supervisor Details are as follows:

Name: _____

Address: _____

_____ Post Code: _____

E-mail Address _____

Phone No: (b) _____ (h) _____ (m) _____

ACC No: _____ Level: _____

SUPERVISED PRACTICAL COACHING EXPERIENCE (Minimum 20 hours)

| DATE | Activity | Hours | Signed (supervisor) |
|------|----------|-------|---------------------|
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