

US SAILING TRAINING PROGRAM SMALL BOAT RACING LEVEL 2 COACH TRAINER APPLICATION

COURSE LOCATION _____ COURSE DATE (___ / ___ / ___)

NAME _____ DATE (___ / ___ / ___)

ADDRESS _____
P.O. Box/Street City State Zip

MAILING ADDRESS _____
P.O. Box/Street City State Zip

PHONE _____(B) _____(R) _____(Fax)

EMAIL _____ SOCIAL SECURITY # _____

DATE OF BIRTH (___ / ___ / ___) SEX ____ (M) ____ (F)

Do you have any learning or physical disability that would prevent you from fully participating in this course?
NOTE: If you have allergies or medical conditions which make it hazardous for you to participate in this activity, you must say so.

IN CASE OF EMERGENCY _____
Name Relationship Phone Number

US SAILING MEMBER NO. _____

EMPLOYMENT HISTORY (Beginning with current employment and including dates, city, state and position held):

ORGANIZATION	FROM __ TO	CITY AND STATE	POSITION HELD

COLLEGE OR UNIVERSITY _____
 Degree(s) held & year received _____
 Major course of study _____

Check the US SAILING courses you have completed, indicating year, location and name of Instructor Trainer.

COURSES	YEAR COMPLETED	LOCATION	INSTRUCTOR TRAINER(S)
<input type="checkbox"/> Small Boat Sailing			
<input type="checkbox"/> Small Boat Sailing Instructor Trainer			
<input type="checkbox"/> Small Boat Racing			
<input type="checkbox"/> Other			

SMALL BOAT SAILING INSTRUCTOR TRAINER EXPERIENCE: List dates and locations of Small Boat Sailing Instructor Courses that you've conducted; if you've team taught, please list the other Instructor Trainers involved:

DATE OF SMALL BOAT SAILING COURSE	LOCATION	TEAM TAUGHT? Y/N	NAME OF OTHER INSTRUCTOR TRAINER(S)

INSTRUCTING EXPERIENCE: (beginning with most recent experience):

1. Have you been a Program Director? Yes No If yes, please give details: _____

2. Have you been a Head Instructor? Yes No If yes, please give details: _____

3. Have you been a Racing Coach? Yes No If yes, please give details.

4. Have you taught advanced sailing? Yes No If yes, please give details

5. Have you taught Team Racing or been involved with it? ____Yes ____No If yes, please give details.

6. What boats have you used to teach or coach sailing? _____

7. Have you ever received any other formal training in instruction techniques? ____Yes ____No
If yes, please specify: _____

SAILING EXPERIENCE:

1. What type of background/experience do you have in the following subjects:

CREW SKILLS:
SPINNAKER SKILLS:
TRAPEZING SKILLS:
RACE TRAINING DRILLS:
BOAT TUNING:
SPORTS MEDICINE:
BOAT MAINTENANCE:

RACING EXPERIENCE:

1. How many years have you raced? _____

2. List your 5 best regatta results from these categories: World, Continental, National, Collegiate
US SAILING, regional, club. (Example: 1983--Sunfish--N. American--8th--Skipper)

YEAR	CLASS	CHAMPIONSHIP	POSITION OVERALL	POSITION ON BOAT

TRAINING EXPERIENCE AS PART OF YOUR EMPLOYMENT:

1. Do you train others? ___Yes ___No If yes, please specify: _____

MANAGEMENT EXPERIENCE:

1. Do you have management responsibilities

a) at work? ___Yes ___No If yes, please specify _____

b) of a voluntary nature? ___Yes ___No If yes, please specify _____

c) Other. ___Yes ___No If yes, please specify _____

2. What race management experience if any, have you had? _____

SAIL ADMINISTRATION:

List any administrative positions you have held in sailing organizations or clubs beginning with the most recent.

NON-SAILING EXPERIENCE:

Have you coached a team in another sport at the high school, collegiate, national, or international levels?

If yes, please give details: _____

ANTICIPATED GEOGRAPHICAL LOCATION OVER NEXT 1-2 YEARS _____

ADDITIONAL REQUIREMENTS TO ACCOMPANY APPLICATION:

- Brief Essay: On a separate sheet of paper, write a short essay outlining why you want to become a Small Boat Coach Trainer. (limit--200 words).
- References: Please list two references (name, address, email, phone, relationship to you), who are familiar with your sailing, teaching and employment history.

1. _____

2. _____

Please answer the following questions. Try to keep your answers concise enough to fit on this form.

1. What, in your opinion, is the most important aspect of training coaches?

2. If you could influence any factors in the training of coaches, what would you suggest?

3. How would you suggest consistency be achieved in evaluating coach candidates?

4. What do you perceive as your strengths as an instructor trainer?

5. What would help you become an even more effective instructor trainer?

*Please briefly describe any new personal teaching or instructor training techniques you have developed that are innovative or worthy of note.

***If there are any other accomplishments which you feel are important in being considered for this position (i.e., publications, lectures, etc.), please feel free to detail them on a separate sheet of paper.**

The Coach Trainer Candidate assumes full responsibility for any loss or damage, excepting loss or damage covered by insurance, that may come to any person, boat, pier, float, or other property used in conjunction with this course as the result of improper use, negligence, violation of the Navigation Rules and racing rules, and other acts of sailors, or other representatives of the host location in connection herewith. The Coach Trainer Candidate further agrees to hold the host location, US SAILING, and their representatives harmless for personal injuries and/or property damage. The Coach Trainer Candidate also accepts that the sport of sailing and the conduct of this course entail and are subject to certain inherent risks and accepts all risks on land and at sea of participation in this program. The Coach Trainer Candidate finally acknowledges that he/she has read the Small Boat Racing Level 2 Coach Trainer Course Information and Prerequisites Sheet and understands what is involved with this course.

Date _____ Applicant Signature _____

___ Enclosed is my check/money order for \$295 payable to US SAILING, or charge my:
___ Visa ___ MasterCard ___ American Express

Card No. _____ Expiration Date _____

Signature _____

Return this application form to: Peri Burns, US SAILING Training Programs, Box 1260, Portsmouth, RI 02871 or fax this to 401-683-0840.

NOTE: Payment must be received at least 3 weeks prior to the beginning of the course or a late fee of \$25 will be charged in addition to the course fee.

Applications will be reviewed by the Course Selection Committee and those candidates who satisfy the prerequisites will be invited to attend. Candidates not invited will be notified in writing and their application fee returned.