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COACHING REQUIREMENT DOCUMENTATION FORM

The Physical Education Program at The Ohio State University requires for admission to the physical education teacher education program that teacher candidates have taught (coached) a minimum of 8 weeks (one full session) in a beginners class in three areas (a) gymnastics, (b) swimming, and (c) one other sport. Beginners are defined as (a) children and youth under the age of 15 and for whom their involvement in the sport or activity can be classified as at a **beginning** level. Such classes can be found at YMCA' parks and recreation centers, youth camps, including OSU Rec Sports. It is expected that to meet the requirement for each activity (a) gymnastics, (b) swimming and (c) another sport, the teacher candidate will spend at least 45 minutes per week for a 8-10 week session per activity (some programs run for 8 weeks some for 10 weeks). The faculty expectation is that during this time teacher candidates will make contact with and arrange to volunteer to assist in the teaching of the activity. This form must be completed by both the teacher candidate and supervisor of the program in which the teacher candidate is assisting. You must complete three forms (one for each activity). Please include these forms when you apply to the major.

To be completed by student (complete one of the following for each form).

Student Name: _____

This meets the:

a) Gymnastics____

Coaching Site (Name, e.g., YMCA): _____

Address: _____

b) Swimming____

Coaching Site (Name, e.g., YMCA): _____

Address: _____

c) Other sport requirement (list sport): _____

Coaching Site (Name, e.g., YMCA): _____

Address: _____

To be completed by supervisor

Dear Supervisor.

Thank you for agreeing to allow this student to volunteer to assist in your classes. Our goal is that the students gain some one-on-one and small group experience in teaching. Could you please complete the following information relative to the student's experience with you. Please be aware that this requirement can only be met by our student working with beginners in the early stages of learning basics.

Supervisor Name: _____ Title: _____
 Phone Number _____ Email _____

Students must assist in beginners classes for at least 45-mins per week for 8 weeks: Please check here if this occurred _____ and indicate how many hours and or how many sessions the student worked here _____

Start Date: _____ Ending Date: _____

Type of assistance performed:

To help us assess the student's skills, please fill out the performance checklist

<i>Skill Set</i>	<i>Excellent</i>	<i>Good</i>	<i>Average</i>	<i>Fair</i>	<i>Poor</i>
Punctuality					
Professional conduct					
One on one interactions with children					
Instructional skills					
Interactions with peers and supervisors					

Additional Comments:

Signature: _____ Date: _____