

Area/Agency/School _____



Application for Sports Training Certification

Please send completed form along with the \$10 certification fee to the SW Office or email to nickc@somi.org.

Send JPEG photo to nickc@somi.org for a badge.

Instructions: Please print clearly or type information below and return to your local program office.

List **Permanent** Mailing Address and telephone number:

Name:	Address:	
City:	State:	Zip:
Phone: ()	Date of Birth:	
email address:	Male <input type="checkbox"/>	Female <input type="checkbox"/>

If your address has changed since your last certification, please check this box.

1. I am applying for CERTIFICATION in the following: _____
2. I attended the training school/webinar held on ____/____/____ in _____
Date of training City/Area
3. Other requirements to become a certified coach:

a. Volunteer A form*	<input type="checkbox"/> Completed ____/____/____	<input type="checkbox"/> Not Completed
b. Protective Behaviors*	<input type="checkbox"/> Completed ____/____/____	<input type="checkbox"/> Not Completed
c. General Orientation	<input type="checkbox"/> Completed ____/____/____	<input type="checkbox"/> Not Completed
d. Concussion Training*	<input type="checkbox"/> Completed ____/____/____	<input type="checkbox"/> Not Completed

These requirements expire after 3 years. All requirements **MUST be up to date to be a certified coach*

4. Playing experience at the high school or college levels: Yes No
 Sport(s): _____

5. Other Information:
 Coaching/Officiating experience at the high school or college levels: Yes No (circle Coach or Official)
 If you are an athlete becoming a coach, please check this box.

6. **If you are utilizing the MENTORING PROGRAM for certification:** a minimum of 10 hours working with a current certified coach and with Special Olympics athletes is required. Please log your practicum hours below.
 *Mentoring coach must have minimum 5 years' experience coach SO athletes and attended a state tournament in the past 2 years for the sport that they are mentoring in.

Date	# of Hours	# of Athletes		Date	# of Hours	# of Athletes		Date	# of Hours	# of Athletes

Name of Mentoring coach _____

7. Having satisfactorily completed all requirements, I hereby request Special Olympics certification in the area identified above.

 Applicant Signature Date Area Director Date Sport Director Date

Make copies as needed and send the original for certification

Coaches' Mentoring Checklist

Section 1—Certification Process and important information Session

- Introductions and using the SO Sports Skills Program Guide and SOMI Guide
 - a) Explain the Special Olympics Sports Skills Guide & SOMI Program and what they are used for
- Special Olympics Mission and Coaching Philosophy
- Explain in detail the importance of Good Sportsmanship and Honest effort
- Give an overview of Events, Rules, Ability Grouping, and Divisioning
 - a) Explain SOMI, SOI & National Governing Body rules
- Discuss Coaching Fundamentals
 - a) Clear, concise, Positive Instructions
 - b) Demonstrate
 - c) Always give praise then Feedback
- Coaches forms & requirements for compliance
 - a) Volunteer A Form, Coaches Code of Conduct, Sport certification & recertification, concussion training
- Athlete Assessment (Medical Forms, Athlete Code of conduct)
- Preparation for the Sport-specific Program
- Organization of a Training Session; Discipline; Opportunities for Athlete Leadership (Global messengers)
- Prevention of Injuries; Emergency Action Plan
 - a) Athlete health appraisal forms (have at all practices & games)
 - b) Safety
 - a. What are the Universal Precautions
 - b. How and when to fill out Incident Reports
- Keys to Coaching Athletes with Intellectual Disabilities (in Training and Competition)
- Coaches Application for sports Certification and Volunteer A Forms

Section 2—Training Session

- Warm-up and Stretching Activities
- Basic Sport Skills and Fundamentals – components of a training session (warm-up, stretching, skills, game play or competition)
- Events for Individual Sports or Individual Skills Contest, Modified Team Competition, and Team Competition for Team Sports
- Strategies for Individual Sports and Basic Information about the Game; Team Formation/Roster, Positions, and Strategies for Team Sports
- Meeting between Mentoring coach and coach to be certified (3 minimum)
- Go over a sample Eight-week Training and Competition Plan
- Coach to be certified observes training/practice (2 minimum)
- Coach to be certified reviews a conditioning or weight training session
- Coach to be certified assists during a training/practice (3 minimum)
- Coach to be certified develops training/practice session (3 minimum)
- Coach to be certified attends competition with team (2 minimum)

The following has been successfully completed by the mentoring coach and the coach to be certified.

Mentoring Coach Verification

Date

Coach to be certified

Date