Stroke & Turn
On-Deck Training Session # ___

TRAINEE NAME: _____ DATE: _____

MEET NAME: _____ MEET SESSION #: _____

(a minimum of four (4) sessions total over two (2) different meets with a Trainer)

Time trials and freestyle only sessions shall not count toward training session requirements.

BENEFIT OF DOUBT GOES TO THE SWIMMER – ALWAYS!

EVALUATION CODES: **P** = Proficient **NW** = Needs Work **D** = Not Observed/Discussed		
SKILL OBSERVED	CODE	COMMENTS
Punctual		
Wears proper attire		
Understands jurisdiction		
Correct position on deck		
Clearly articulates infraction(s)		
Understands rules and interpretations of BUTTERFLY		
Understands rules and interpretations of BACKSTROKE		
Understands rules and interpretations of BREASTSTROKE		
Understands rules and interpretations of FREESTYLE		
Understands rules and interpretations of INDIVIDUAL MEDLEY		
Understands RELAY take off procedures		
Completes DQ write-up/relay take-off slips correctly		
Uses proper radio protocol		
Observes all lanes equally including those without swimmers		
Acts diplomatically, professionally, and respectfully with others		

** Required*

Is trainee recommended to become a certified Stroke & Turn? * ☐ **Yes** ☐ **No**

If no, what does the trainee need to work on going forward in their training?

TRAINER: _____ MEET REFEREE: _____

Trainer must be certified in the position for at least one (1) year.

Rev: 09/2025