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	Illino	ois YMCA Swimming Level II on-dec	ck Training
Trainee Name:		YMCA:	Date:
Trainee Email:			
Meet:		Meet Session:_	Training Session:
Rating system: P (proficient	to perform unsupe	ervised) I (understands concepts and rules, but nee at this meet)	eds more training) N (not satisfactory) N/A (not observe
Skill Observed	Rating	Comments	
		Starter	
Deck Position			
Professional Manner (dress+demeanor)			
Quality of "Take your marks" command (calm and conversational)			
Understands how to "read" athletes			
Patience and confidence			
Able to identify False Starts and follows protocol for dual confirmation			
Uses "stand please" and other commands as appropriate			
Prompt in position and ready with microphone			
Able to manage "flyover" starts			
Able to do OOF			
Knows hand protocol for disabled athletes			
Can conduct a proper timers meeting			
		DECK REFEREE	
Whistle/Starting Protocol (chirps and long whistle as directed by Meet Ref)			
Professional manner (communication and teamwork)			
Position, awareness (eyes on the pool)			

Timeline managment
Radio profeciency
Understands false
starts and protocol

Understands timing adjustments and table management							
Can run Officials meeting (assignments, protocol, stroke brief)							
Can Officiate athletes with disabilities							
Reviews and tracks DQ's							
Knows about Meet Certification form							
Should this session count for training? YESNO (if no, please explain)							
What can you tell the Committee about the session, the trainee and the training conducted? What should the trainee work on in their next session(s)?							
			T				
Trainer			Club:				
Meet Referee signature:			Club:				
This training sheet needs to be photographed(or scanned) and emailed to your district representative and the State Officials Chair							