South African Figure Skating Association

Teaching Assistantship Program

Teaching Assistant Logbook

Teaching Assistant Name:

Responsible Coaching Mentor Name:

TEACHING ASSISTANT DECLARATION: I, the Teaching Assistant, through my signature hereunder hereby declare that the information included in the Logbook below is a true and accurate reflection of my daily coaching activities for the period indicated.

COACHING MENTOR DECLARATION: I, the Coaching Mentor, through my signature hereunder hereby declare that the information included in the Logbook below is a true and accurate reflection of the Teaching Assistant's daily coaching activities for the period indicated.

SIGNATURES			
Teaching Assistant:		Date:	
Mentor Coach:		Date:	

FOR OFFICE USE ONLY			
Date Received:		Signed:	

DAILY LOGBOOK OF COACHING ACTIVITIES

Logbook Period From: D D M M Y Y Y Y To: D D M M Y Y Y Y

Pupil Name	Week No	Number of Lessons							Total Weekly Lessons
		Mon	Tue	Wed	Thu	Fri	Sat	Sun	

Pupil Name	Week No	Number of Lessons							Total Weekly Lessons
		Mon	Tue	Wed	Thu	Fri	Sat	Sun	
Total Number of Lessons for the Period:									