



**PRACTICAL COACHING RECORD
LEVEL 3 - SINGLES**

MAKE A PHOTOCOPY OF THIS FORM PRIOR TO MAILING

Coach's Name: _____	Section: _____
Address: _____	
Postal Code: _____	Telephone #: () _____
Skate Canada # : _____	CAC Passport No: _____

The coach must complete the following areas (A, B, C, D and E) to be credited with Level 3 Practical. There is no maximum time limit for completion of this component.

COACH DECLARATION: I hereby certify that all the information in this submission is true and complete.	
_____	_____
<i>Date</i>	<i>Signature of Coach</i>

- A. Proof of Skate Canada Coaching Membership AND valid First Aid Certificate.**
- B. Proof of completion of Level 3 Theory is enclosed.**

Date of Theory Course: _____
Location: _____

- C. Proof of completion of Level 3 Technical (GS & Singles) is enclosed.

<p>Date of Technical Course: _____</p> <p>Location: _____</p>

- D. Coaching Hours

I, _____, President of the _____
(Name of Club President) (Name of Club)

_____ and a member of the Skate Canada in good standing, hereby attest to the

fact that _____ has completed a minimum of
(Name of Coach)

150 hours (minimum of 100 hours on-ice) coaching Singles at this club _____ commencing
(Club #)

on _____ and finishing on _____.

Signature of Club President

Skate Canada Number

Telephone Number

Signature of Witness

Skate Canada Number

Telephone Number

Date: _____

- E. The Level 3 Singles coach must complete the following requirements (Club Declaration and Tests Passed Parts 1 & 2). You may not claim the same skater for all of these tests.

CLUB DECLARATION

I, _____, hereby attest that _____
(Name of Club Official) *(Name of Coach)*

coached the following skater(s) for a minimum of 3 months up to and including
 completion of the tests indicated below at the _____ Club.
(Name & Number of Club)

Signature of Club President *Skate Canada Number* *Telephone Number*

Signature of Official *Skate Canada Number* *Telephone Number*

TESTS PASSED - PART 1: Effective January 1, 2003:

The coach must have a skater pass two consecutive Free Skating tests (complete) at the Senior Silver/Gold or Novice-Senior competitive test level OR 2 different skaters pass 2 different tests at the Senior Silver/Gold and/or Novice to Senior Competitive test level.

Skater's Name & Skate Canada Number	Complete Skate Canada Free Skating / Singles Tests	Date	Signature of 2 Club Officials(*)/ Positions Held & Skate Canada Numbers
	Complete Test Passed:		1. _____ 2. _____
	Complete Test Passed:		1. _____ 2. _____

☐ **TESTS PASSED - PART 2: Effective January 1, 2003: The coach must have skaters pass two additional tests that may be any combination of the following:**

- Senior Silver Free Skate or higher
- Novice Competitive test or higher
- Senior Silver Skating Skills or higher

Skater's Name & Skate Canada Number	Complete Skate Canada Test	Date	Signature of 2 Club Officials(*)/ Positions Held & Skate Canada Numbers
	Complete Test Passed:		1. _____ 2. _____
	Complete Test Passed:		1. _____ 2. _____

*Acceptable club representatives include - test chairperson, club president, test referee or coach liaison.

RETURN THE COMPLETED FORM TO THE:

**Skate Canada Coaching Department
865 Shefford Rd.
Gloucester, Ontario K1J 1H9
Toll Free Fax: 1-877-211-2372**