



# AUSTRALIAN PARACHUTE FEDERATION

# R2a

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ABN: 75 061 266 510

## COACH APPLICATION AND SUMMARY OF ASSESSMENT

CANDIDATE INFORMATION AND SUMMARY OF RESULTS						
Name:	APF No:		Mobile:			
Registered CI:			Club Code:			
<b>Application for Appointment as:</b>	<i>Cert B Coach</i>	<i>Freefly Coach</i>	<i>Wingsuit Coach</i>	<i>High-Performance Canopy Coach</i>	<i>CRW Coach</i>	<i>Canopy Coach</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
						NOTE: CANDIDATE IS A CURRENT INSTRUCTOR <input type="checkbox"/>
<b>Summary of Results:</b>						
Written Assessment Score:	<input type="text" value=""/>	%	Satisfactory	<input type="checkbox"/>	Not yet satisfactory	<input type="checkbox"/>
Practical Assessment Result:			Satisfactory	<input type="checkbox"/>	Not yet satisfactory	<input type="checkbox"/>

STATEMENT BY CHIEF INSTRUCTOR		(Initial each statement if correct, and sign below)
CI (Print name) .....		
<ul style="list-style-type: none"> <li>The candidate meets all prerequisites and I (or an expert coach) have conducted this assessment in accordance with APF regulations and standard procedures. ....</li> <li>The candidate has demonstrated the required practical performance, including:               <ul style="list-style-type: none"> <li>Preparation: Accessed trainee info and specific skills requirements to determine objectives and plan for the jump; Checked suitability of equipment; Conducted appropriate briefings, dirt-dives and gear checks; Monitored weather and ground conditions; .....</li> <li>Managed emplaning, ride to height; Performed exit, freefall &amp; canopy flight and landing coaching/leading activities; .....</li> <li>Reviewed trainee performance conducting appropriate debriefs; Recorded relevant information in logs; Provided/sought feedback on own performance to/from CI or expert coach. ....</li> </ul> </li> <li>Assessment jump number(s) from candidate's logbook: .....</li> <li>The candidate has been retrained and reassessed on any knowledge or skills gap identified during the assessment process. ....</li> <li>I am satisfied with candidate's ability to act as Coach in this discipline and recommend appointment. ....</li> </ul>		
Name of person who conducted practical assessment .....		
CI Signature .....	Date .....	.....
Candidate Signature .....	Date .....	.....

*Applications for Coach appointments not approved and processed within 12 months will automatically be cancelled and removed from the workflow, and applicants will have to submit a new application.*

### Payment Information

For each new coach/leader qualification being applied for (\$30 each).  
**When the Candidate is deemed competent, please submit this via post or email the APF Office ([apf@apf.com.au](mailto:apf@apf.com.au))**

MasterCard / VISA / E.F.T.

The APF Office will contact you for/with payment details.

Cheque / Money Order

Please adhere securely to this application form and post to **APF PO Box 1440, Springwood QLD 4127**

Life Member  (Free to Life Members)

Office Use Only: .....