

# BASKETBALL LEVEL 2 COACH AWARD

**CANDIDATE LOGBOOK** 



# **COACHING LOGBOOK AND PORTFOLIO**

Name of Candidate:

This Logbook is issued to basketball coaches preparing for a basketball qualification. Coaching awards require evidence of actual training sessions conducted and a record of game coaching experience. Sample Coaching Session Planners and Game Coaching Reports are included in this Logbook. An important part of each of these forms is the evaluation section which should be completed after each training session or game. A Coach may use their own Session Planner and Game Reports but these must include the main features of the samples and must include an Evaluation Section. Experience will be in both coaching sessions and game coaching.

For the **Level 2 Coach Award,** the minimum requirement for assessment purpose is :-

- **2 Training Sessions** covering not less than 2 hours
- 2 Games Coached

#### "Keep this log up to date as it will be an important component in your basketball coaching career."

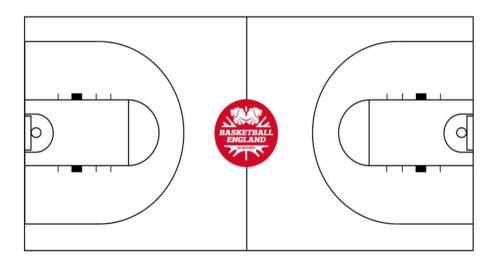
Remember to complete an evaluation after each training session and each game!

### **PLANNING A TRAINING SESSION**

Session:	Date:	Venue:
Group:	Age:	Gender:
Number:	Experience:	
Aims of Session:		

#### FACILITIES / EQUIPMENT:

Indicate positions of baskets:



Safety issues:

Number of basketballs available: Other equipment:

Staffing (Coaches/Assistant Coach):

Participants with particular needs:

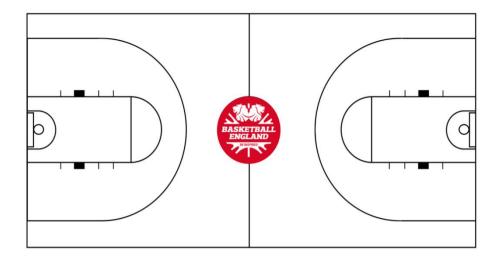
### **COACHING SESSION PLANNER 1**

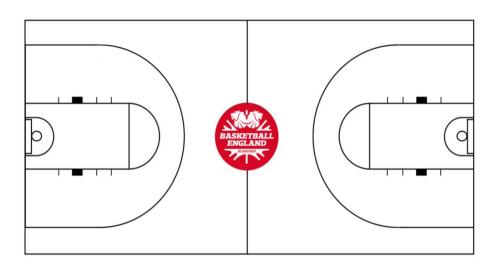
Date:		Ve
Start:		Fir
No. of Players:		Ma
Absentees / Injuries:		
Assistant Coaches:		
Objectives:		
Equipment: Balls:	Bibs:	

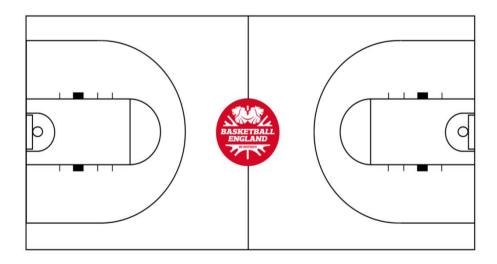
/enue:	
-inish:	
Male:	Female:

Other:

	DRILLS:	EMPHASIS:	COMMENTS:	
WARM-UP / INTRODUCTI ON:				
MAIN CONTENT:				
COOL DOWN				







### **COACHING SESSION EVALUATION**

1. Aims & Objectives – were these achieved, both personal and for the group?			
2. Players' Performance - improved / not in	mproved?		
3. Did you have any behaviour problems?			
4. Health & Safety Issues - to consider at fu	uture sessions / report to others?		
5. Organisation – were the practices used appropriate?			
6. Was the content appropriate?			
7. Coaching Performance - reflect critically adaptability, organisation, coaching style)	y on your coaching (communication,		
8. Action Next Session: Players:-	Yourself:-		

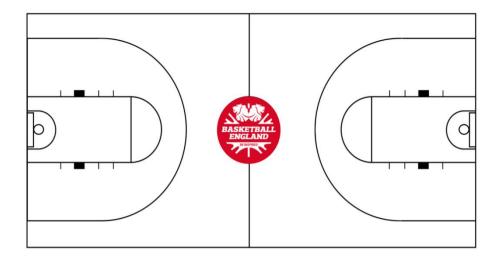
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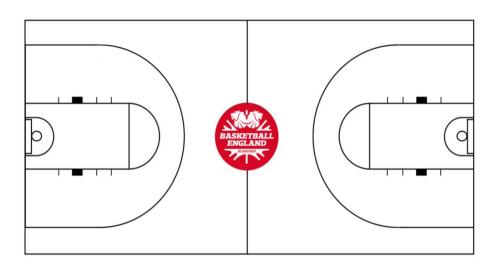
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No. of Players:		Ma
Absentees / Injuries:		
Assistant Coaches:		
Objectives:		
Equipment: Balls:	Bibs:	

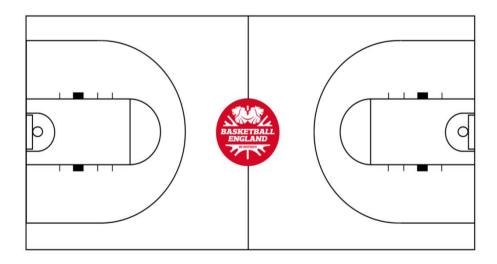
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Male:	Female:

Other:

	DRILLS:	EMPHASIS:	COMMENTS:	
WARM-UP / INTRODUCTI ON:				
MAIN CONTENT:				
COOL DOWN / SUMMARY:				







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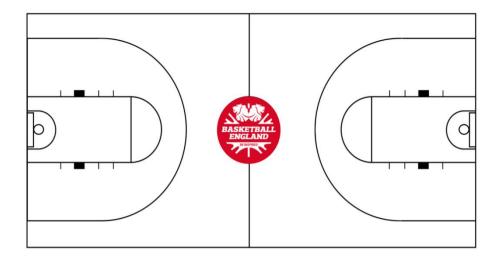
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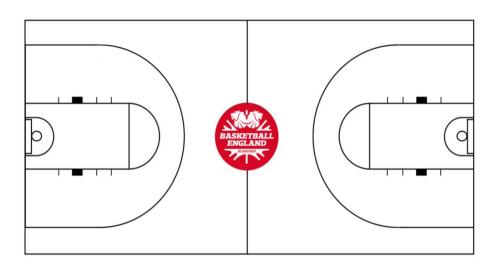
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No. of Players:		Ν
Absentees / Injuries:		
Assistant Coaches:		
Objectives:		
Equipment: Balls:	Bibs:	

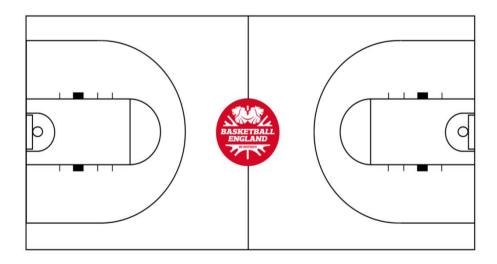
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Male:	Female:

Other:

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6. Was the content appropriate?		
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8. Action Next Session: Players:-	Yourself:-	

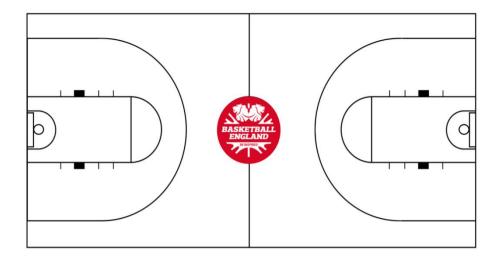
### **COACHING SESSION PLANNER 4**

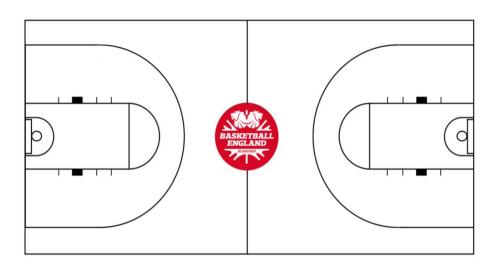
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No. of Players:		M
Absentees / Injuries:		
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Objectives:		
Equipment: Balls:	Bibs:	

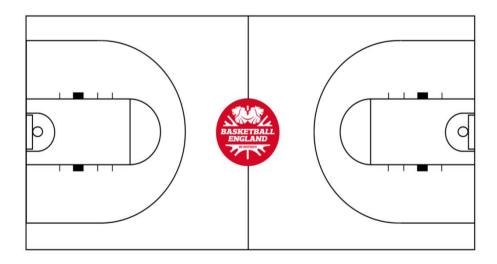
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7. Coaching Performance - reflect critically on your coaching (communication, adaptability, organisation, coaching style)			
8. Action Next Session: Players:-	Yourself:-		

## **GAME COACHING PLANNER 1**

Date:

Opponents:

Time:

Venue:

Game Plan: Offence:

Defence:

Special Situations:

#### Players:

No.	Own Team:	Opponents:

#### Result:

Game Plan Evaluation:

Notes for Next Training Session:

## **GAME COACHING PLANNER 2**

Date:

Opponents:

Time:

Venue:

#### Game Plan:

Offence:

Defence:

Special Situations:

#### Players:

No.	Own Team:	Opponents:

#### Result:

Game Plan Evaluation:

Notes for Next Training Session:

## **GAME COACHING PLANNER 3**

Date:

Opponents:

Time:

Venue:

Game Plan:

Offence:

Defence:

Special Situations:

#### Players:

No.	Own Team:	Opponents:

#### Result:

Game Plan Evaluation:

Notes for Next Training Session:

## **GAME COACHING PLANNER 4**

Date:

Opponents:

Time:

Venue:

Game Plan:

Offence:

Defence:

Special Situations:

#### Players:

No.	Own Team:	Opponents:

#### Result:

Game Plan Evaluation:

Notes for Next Training Session:

### FACILITY HEALTH AND SAFETY AUDIT

Undertake a health and safety audit of the facilities being used for the course and identify potential hazards.

Address of Venue::

Contact Name:

Contact No.:

Potential Hazards:

Identify the whereabouts of the first aid room at the facility or telephone location and number to contact emergency services.

First Aid Room:

Telephone Contact:

### **EMERGENCY PROCEDURES: FACILITY HEALTH & SAFETY AUDIT**

Record the emergency procedures for the facility where you coach on a regular basis.

Name & Address of Home Court:

Position of First Aid Room (if available):

Position of Nearest First Aid Box:

Main Contents of First Aid Box:

Date Contents Last Checked?

Nearest Telephone to Playing Court: (if an extension, how to dial out):

Emergency Telephone Number (999) or:

Name of Club Member(s) who are First Aiders or who have appropriate medical qualifications:

1.	Qualification:
2.	Qualification:
3.	Qualification:
4.	Qualification:
5.	Qualification:

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Name of Club Member(s) who are First Aiders or who have appropriate medical qualifications:

1.	Qualification:
2.	Qualification:
3.	Qualification:
4.	Qualification:
5.	Qualification:

### **INJURY RECORD/REPORT FORM**

Date:	Team/Session:
Name of Injured Person:	
DETAILS OF INJURY	
Description of injury:	
Where it happened:	
Time:	
Name of any witnesses:	
ACTION TAKEN	
Treatment action/referral:	
Guardian informed:	
POST INJURY OUTCOME	
Notes:	

Signature of Coach:



**SURE SHOT** 







DYNAMIK





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