

Application to Enter Advanced Instructor Training Program

Name _____ Date _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ E-mail _____

Phone _____

ELIGIBILITY INFORMATION & CHECK LIST

- _____ 1. Registered Ortho-Bionomy Instructor, with minimum of two years of Ortho-Bionomy teaching experience
- _____ 2. Minimum of 12 Ortho-Bionomy classes taught (including Phase 4, Exploration of Movement Patterns, Posture & Post Techniques, Isometrics/Isotonics). Submit documentation of classes with dates and number of students.
- _____ 3. Instructor member in good standing of SOBI
- _____ 4. 2 Recommendation forms from the two Advanced Instructors who agree to serve as Advisors and oversee your training.

APPLICANT STATEMENT

I submit that I am eligible and prepared for Advanced Instructor training and my application portfolio is complete. I have discussed the training process with my Advisors and am prepared for Advanced Instructor Training.

Signature of Applicant: _____

ADVISOR STATEMENT

We submit that our advisee is eligible and prepared for Advanced Instructor training and his/her forms are complete. We have discussed the training process with the Trainee and contract to serve as his/her Advisors throughout his/her training process.

1) Program Advisor _____

Signature _____

2) Program Advisor _____

Signature _____

Advanced Instructor Training Program Enrollment Fee: \$100.00

You may pay on the SOBI website www.ortho-bionomy.org

Essay Questions from Arthur Lincoln Pauls to Enter AITP

1. Describe how you became interested in Ortho-Bionomy, and how did it occur? _____

2. What is your interest in teaching Advanced work? _____

3. What understandings do you feel Ortho-Bionomy has given you? _____

4. In having this understanding, what do you feel you can do for Ortho-Bionomy? _____

5. What do you think Ortho-Bionomy is, and how do you feel it relates to the “Evolution of the Original Concept”? _____

6. What do you think is the difference between Basic and Advanced Instructor? _____

7. From your previous experience, what does Phase 7 mean to you? _____

Additional Essay Question

8. What do you feel are your strengths in regard to this training and what do you feel will be challenging for you?

Instructor/Advisor Recommendation Form to Enter AIT Program

Trainee Name _____ Date _____

Registered Advanced Instructor giving recommendation: _____

Please complete this form and return to the applicant as soon as possible. Thank you in advance for your participation in the process.

1. How long have you known this applicant? _____

2. Based on your personal knowledge and familiarity with this applicant, please comment in regards to the following elements: How do they meet their students? Can they allow the process to happen? Can they adapt their teaching method to fit the students learning styles? How are they at staying out of the personal dramas? _____

3. Is the trainee able to self-assess and hear feedback? _____

4. What are the applicant’s strengths as an Instructor? _____

5. What qualities of the applicant are suited for becoming an Ortho-Bionomy Advanced Instructor? _____

6. Are you committed to working with them in regards to their challenges in their training process? _____

7. Please comment on the Instructor’s energetic ethics. _____

Recommending Instructor Statement:

____ I hereby recommend the applicant be accepted into the Advanced Instructor Training Program. My signature below is my contract to serve as the candidate’s advisor throughout the training process

____ I decline to recommend the applicant at this time; my explanation is attached.

Advanced Instructor Signature: _____ Date: _____

Instructor/Advisor Recommendation Form to Enter AIT Program

Trainee Name _____ Date _____

Registered Advanced Instructor giving recommendation: _____

Please complete this form and return to the applicant as soon as possible. Thank you in advance for your participation in the process.

1. How long have you known this applicant? _____

2. Based on your personal knowledge and familiarity with this applicant, please comment in regards to the following elements: How do they meet their students? Can they allow the process to happen? Can they adapt their teaching method to fit the students learning styles? How are they at staying out of the personal dramas? _____

3. Is the trainee able to self-assess and hear feedback? _____

4. What are the applicant's strengths as an Instructor? _____

5. What qualities of the applicant are suited for becoming an Ortho-Bionomy Advanced Instructor? _____

6. What areas will be particularly challenging for the applicant in their Advanced Instructor Training Process?

7. Are you committed to working with them in regards to their challenges in their training process? _____

8. Please comment on the Instructor's energetic ethics. _____

Recommending Instructor Statement:

____ I hereby recommend the applicant be accepted into the Advanced Instructor Training Program. My signature below is my contract to serve as the candidate's advisor throughout the training process

____ I decline to recommend the applicant at this time; my explanation is attached.

Advanced Instructor Signature: _____ Date: _____

Advanced Instructor Training Program Record Form (page 1 of 2)

Name _____ Date _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ E-mail _____

Phone (Home) _____ Phone (Work) _____

AITS Date _____ Location _____

Instructors _____

Phase 5 Classes

	Date	Location	Instructor
Observation	_____	_____	_____
Observation	_____	_____	_____
Observation	_____	_____	_____
Bench Assist	_____	_____	_____
Bench Assist	_____	_____	_____
Bench Assist	_____	_____	_____
Bench Assist	_____	_____	_____
Bench Assist	_____	_____	_____
Co-Teach	_____	_____	_____
Co-Teach	_____	_____	_____
Co-Teach	_____	_____	_____
Supervised Teach	_____	_____	_____
Supervised Teach	_____	_____	_____

Program Record Form (page 2 of 2)

Name _____

Phase 6 Classes

	Date	Location	Instructor
Observation	_____	_____	_____
Observation	_____	_____	_____
Observation	_____	_____	_____
Observation	_____	_____	_____
Bench Assist	_____	_____	_____
Bench Assist	_____	_____	_____
Bench Assist	_____	_____	_____
Bench Assist	_____	_____	_____
Bench Assist	_____	_____	_____
Co-Teach	_____	_____	_____
Co-Teach	_____	_____	_____
Co-Teach	_____	_____	_____
Co-Teach	_____	_____	_____
Co-Teach	_____	_____	_____
Supervised Teach	_____	_____	_____
Supervised Teach	_____	_____	_____
Other	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

Advanced Instructor Training Program Agreement Form Phase 5

Instructor Trainee Name _____

Date of AITS 1 if taken _____

AITS 1 Instructors _____

Based on the input of two advisors and AITS instructors (if relevant) the minimum number of the following is suggested in phase 5:

Bench Assists _____

Co-teaches _____

Supervised Teaches _____

Additional training requirements or agreements:

Advisor Signature: _____

Advisor Signature: _____

Signatures of AITS 1 Instructors if relevant

Instructor Trainee Signature: _____

Advanced Instructor Training Program Agreement Form Phase 6

Instructor Trainee Name _____

Date of AITS 2 if taken _____

AITS 2 Instructors _____

Based on the input of two advisors and AITS instructors (if relevant) the minimum number of the following is suggested in phase 6:

Bench Assists _____

Co-teaches _____

Supervised Teaches _____

Additional training requirements or agreements: _____

Advisor Signature: _____

Advisor Signature: _____

Signatures of AITS 2 Instructors if relevant

Instructor Trainee Signature: _____

Trainee Self-Evaluation Form (use one for each observation, bench assist, co-teach, and supervised teach)
NOTE: this form is to be filled out and submitted with your portfolio. The following page contains questions for your reflection on the experience; answers to the second page do NOT need to be submitted.

Trainee Name _____

Date _____ Course _____ Location _____

Number of units/hours _____ Number of students in class _____

Supervising Instructor(s) _____

This was a: Phase 5 _____ Phase 6 _____ Other _____

Observation _____ Bench Assist _____ Co-Teach _____ Supervised Teach _____

If more space is needed, please attach additional sheet(s)

1. What were your goals/objectives/focus for this class? _____

2. What did you do in the class (e.g. what areas did you present, did you run a circle, in what other ways did you participate?) _____

3. Self-evaluation (How did it go for you? What did you learn? What was challenging? Where do you need to focus next?) _____

Trainee Signature: _____ Date: _____

Advisor Signature: _____ Date: _____

Evolverment to Associate Advanced Instructor Request Form

Name _____ Date _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ E-mail _____

Phone (Home) _____ Phone (Work) _____

Checklist:

____ I formally request to be considered for evolverment to Associate Advanced Instructor.

____ I am currently an Instructor member of the Society in good standing.

____ My completed Phase 5 portfolio is attached

Advanced Instructor Training Program Evolverment Fee: \$150.00, can be paid now or at Advanced Instructor evolverment.

Note: Email this completed form and Training Program Agreement, all trainee evaluation and instructor evaluation bench assist forms, letters of Recommendation Forms and Program Record Form to office as a single PDF. Also provide both advisors with a copy of all of the above.

1. How has your perception of Phase 5 changed during your training process? _____

2. What new understandings have you gleaned that you feel will make you a better instructor? _____ \\

3. How has your understanding and experience of the phases, reflexes, and principles changed during your Phase 5 training? _____

4. What do you consider your strengths as a Phase 5 Instructor? _____

5. What areas do you still feel you need to improve or develop as a Phase 5 Instructor? _____

6. _____

Trainee Signature _____

Reviewing Advisor Signature _____

Recommendation Form for Evolvement to Associate Advanced Instructor

Trainee Name _____ Date _____

Recommending Advanced Instructor Advisor _____

Please complete this form and return to the applicant.

(Attach additional sheets if necessary)

1. What is your knowledge of the trainee’s teaching and training experience to date? _____

2. What is your assessment of the Trainee’s readiness to evolve? _____

3. What areas of concentration should the Trainee be aware of as they pursue Phase 6 training? _____

4. Do you have any observations regarding the trainees understanding of energetic ethics? _____

5. Is the trainee able to demonstrate Phase 5 in a way that is accessible to the students? _____

____ I recommend the applicant be appointed as an Associate Advanced Instructor

____ I decline to recommend the applicant at this time; my explanation is attached

Advanced Instructor Signature: _____ Date: _____

Evolverment to Advanced Instructor Request Form

Name _____ Date _____

Address _____

City _____ State/Province _____ Zip/Postal Code _____

Country _____ E-mail _____

Phone (Home) _____ Phone (Work) _____

____ I formally request to be considered for evolverment to Advanced Instructor.

____ I am currently an Instructor member of the Society in good standing.

____ I am including my completed Phase 5 and Phase 6 portfolio

Advanced Instructor Training Program Evolverment Fee: \$150.00, if not paid at Associate Advanced Instructor evolverment.

Note: Email this completed form and Program Agreement Phase 5 Form, Program Agreement Phase 6 Form, all trainee evaluation and instructor evaluation bench assist forms, and Program Record Form (pages 1 and 2) to office. Also provide both advisors with a copy of all of the above.

(Attach additional sheets if necessary)

1. How has your perception of Phase 6 changed during your training process? _____

2. What new understandings have you gleaned that you feel will make you a better instructor? _____

3. How has your understanding and experience of the phases, reflexes, and principles changed during your Phase 6 training? _____

4. What do you consider your strengths as a Phase 6 Instructor? _____

5. What areas do you feel you still need to improve or develop as a Phase 6 instructor? _____

6. Do you feel able to demonstrate the relationship between energy & structure in a way that is accessible to the students?

7. How would you describe your understanding of energetic ethics? _____

8. We would appreciate your feedback regarding the Advanced Instructor Training Process. Please be as specific as possible in your descriptions of what was most useful to your process and what was least helpful. Thank you.

Trainee Signature _____

Reviewing Advisor Signature _____

Recommendation Form for Evolvement to Advanced Instructor

Trainee Name _____ Date _____

Recommending Advanced Instructor Advisor: _____

Please complete this form and return to the applicant.

(Attach additional sheets if necessary)

1. What is your knowledge of the trainee’s teaching and training experience to date? _____

2. What is your assessment of the Trainee’s readiness to evolve? _____

3. What areas of concentration or challenges should the Trainee be aware of as they pursue further training (Phase 7, Ethics and Emotions, Residential,etc.)? _____

4. Do you have any observations regarding the trainees understanding of energetic ethics? _____

____ I recommend the applicant be appointed as an Advanced Instructor

____ I decline to recommend the applicant at this time; my explanation is attached

Advanced Instructor Signature: _____ Date: _____

Reviewing Advisor Signature: _____ Date: _____

Advanced Instructor Program Applications & Evolvement Reference

Below is a summary for reference of applying (some are online applications, others are submissions), number of copies, fees and more. Please use this document as support, along with the complete handbook.

Program	What to Submit	How to Submit	Annual Fee
Advanced Instructor Training App	Application Portfolio	Email completed form as single PDF to office@ortho-bionomy.org	\$100
Associate Advanced Instructor	Training Completion Portfolio	Email completed form as single PDF to office@ortho-bionomy.org	\$150
Advanced Instructor	Training Completion Portfolio	Email completed form as single PDF to office@ortho-bionomy.org	None

Instructor Review Committee Cycle:

Review Committee Session cycles begin on March 15 June 15 September 15 December 15

The committee session ends the day before the next committee. Most times committees look at paperwork and forward their decisions early in the session, but they have until the next committee cycle to complete their findings. **Documents received after the 15th will be held over to the next quarter.**

Advanced Instructor Applications & Evolvments

- Copy of portfolio electronically scanned as a single PDF –and- email to office@ortho-bionomy.org

Note: If you do not have ability to email from your home, many libraries, office supply stores, and copy centers such as Kinkos, FedEx can scan and create a PDF for you.

IRC Evolvment Cycles:

- Email completed packets by midnight March 15, June 15, September 15, and December 15th

Glossary of Terms: Active teaching experience - 3-5 classes a year (updated 3.2013)

Apply: Advanced Instructor Training Program Application*Application Pre-Requirements:*

- Practical Experience:
 - a. Minimum of 2 years of Ortho-Bionomy course teaching experience with demonstrated competence.
 - b. Minimum of 12 Ortho-Bionomy classes taught (including Phase 4, Exploration of Movement Patterns, Posture & Post Techniques, Isometrics & Isotonics)
 - c. Instructor member of SOBI in good standing
- Discussion with Advanced Instructors (minimum two) to determine Trainee's readiness & Instructors' participation, with review of entrance essay questions.
- Submission of application portfolio with required fee

Advanced Instructor Training Program Application Packet checklist and included in this packet order:

- Application to Advanced Instructor Training Program
- Typed answers to essay questions.
- 2 completed recommendation forms from 2 Registered SOBI Advanced Instructors who agree to be Trainee's Advisors and supervise training.

Advanced Instructor Training Application Detailed directions:

- SOBI Membership is current.
- All sections and requirements completed and typed.
- To emailed to the SOBI office
 1. Advanced instructor training program application.
 2. Essay questions (typed).
 3. 2 Recommendation form for entrance into Advanced Instructor Training Program from Advanced Instructors that agree to be Trainee's Advisors.
- Pay \$100 application fee online at www.ortho-bionomy.org
 - Keep original for yourself, send a copy to your Advisor.
- Scan **one** PDF a copy of packet in entirety as a single PDF and email to office@ortho-bionomy.

Advanced Instructor Application is sent to the Instructor Review Committee and their recommendation sent to the SOBI Board for approval. You will be notified of the status of your application into the Advanced Instructor Program after next IRC meeting. Once accepted trainee can begin Phase 5 training - Bench Assists, optional AITS, co-teaches and supervised teach.

Evolverment to Associate Advanced Instructor – Associate Advanced (Phase Five) portion of the Training Program.

Evolverment packet checklist and included in this packet order:

- Evolverment to Associate Advanced Instructor request form from trainee.
- Program Record form page 1 to Advanced Instructor Training Program.
- Program Agreement form Phase 5, outlining number of bench, co-teach required.
- 2 completed recommendation forms from 2 Advanced Instructor Advisors.
- Bench Assist Phase 5 – Trainee Self-Evaluation & Instructor Class Evaluation. (minimum 2)
- Co-Teach Phase 5 – Trainee Self-Evaluation & Instructor Class Evaluation. (minimum 2)
- Supervised Teach Phase 5 – Trainee Self-Evaluation & Instructor Class Evaluation. (min. 1)

Associate Advanced instructor training program evolverment detailed directions:

- SOBI Membership is current.
- All sections and requirements completed and typed.
- Scan completed documentation into a single PDF **in this order**
 1. Associate Advanced Instructor Training Program evolverment form from Trainee.
 2. Program Record form.
 3. Program Agreement form – outlining number of bench, co-teach, supervised teaches required.
 4. 2 Recommendation form for evolverment to Associate Advanced Instructor Training from Trainee’s Advisors.
 5. 2 (or more) Bench assist phase 5 – trainee self-evaluation & Instructor evaluation.
 6. 2 (or more) Co-teach phase 5 – trainee self-evaluation & Instructor evaluation.
 7. 1 (or more) Supervised phase 5 – trainee self-evaluation & Instructor evaluation.
- Pay \$150 evolverment fee online at www.ortho-bionomy.org
- Keep original for yourself, send a copy to your Advisor.
- Email to office@ortho-bionomy.org

Associate Advanced Instructor evolverment is sent to the next Instructor Review Committee and their recommendation is sent to the SOBI Board for approval. You will be notified of the status of your evolverment after next IRC meeting. Once accepted *the* Trainee can teach Phase 5 and continue Phase 6 training - Bench Assists, co-teaches and supervised teach.

Evolverment to Advanced Instructor: Advanced Instructor (Phase Six) portion of the Training Program.**Evolverment packet checklist and included in this packet order:**

- Evolverment to Advanced instructor request form from Trainee
- Program Record form completed page 1-2 to Advanced Instructor Training Program
- Program Agreement form Phase 5 & 6, outlining number of bench, co-teach required
- 2 completed recommendation forms from 2 Advanced Instructor Advisors
- Bench Assist Phase 6 – Trainee Self-Evaluation & Instructor Class Evaluation (min. 2)
- Co-Teach Phase 6 – Trainee Self-Evaluation & Instructor Class Evaluation (min. 2)
- Supervised Teach Phase 6 – Trainee Self-Evaluation & Instructor Class Evaluation (min. 1)
- Bench Assist Phase 5 – Trainee Self-Evaluation & Instructor Class Evaluation
- Co-Teach Phase 5 – Trainee Self-Evaluation & Instructor Class Evaluation
- Supervised Teach Phase 5 – Trainee Self-Evaluation & Instructor Class Evaluation

Advanced Instructor Training Program evolverment detailed directions:

- SOBI Membership is current.
- All sections and requirements completed and typed.
 1. Advanced Instructor Training Program evolverment form from Trainee
 2. *Advanced Instructor Training* Program Record form
 3. Program Agreement form – outlining number of bench, co-teach, supervised required
 4. 2 Recommendation forms for evolverment to Advanced Instructor from *two* Advisors
 5. 2 (or more) Bench assist phase 6 – Trainee self-evaluation & Instructor evaluation
 6. 2 (or more) Co-teach phase 6 – Trainee self-evaluation & Instructor evaluation
 7. 1 (or more) Supervised phase 6 – Trainee self-evaluation & Instructor evaluation
 8. 2 (or more) Bench assist phase 5 – Trainee self-evaluation & Instructor evaluation
 9. 2 (or more) Co-teach phase 5 – Trainee self-evaluation & Instructor evaluation
 10. 1 (or more) Supervised phase 5 – Trainee self-evaluation & Instructor evaluation
- No evolverment fee if paid as an Associate Advanced Instructor.
- Keep original for yourself, send a copy to your Advisor.
- Compile all documentation into a single PDF and email to office@ortho-bionomy.org

Advanced Instructor evolverment is sent to the next Instructor Review Committee, and their recommendation is sent to the SOBI Board for approval. You will be notified of the status of your evolverment after next IRC meeting. Once accepted the Trainee can teach Phase 6.