

**Society of Ortho-Bionomy International**<sup>®</sup>

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# **Registered Instructor Training Program Handbook**

**Revised August 2006**

Please read through the Instructor Training Program Handbook in its entirety to familiarize yourself with the Instructor Training Process, Policy and Forms before beginning the Instructor Training Program.

SOBI has done its best to lay out clearly all the steps in the Instructor training process, and to clarify areas of ambiguity. It is the applicant or trainee's responsibility to contact the SOBI Office by email with any questions about the meaning or intent of a part of the process. The SOBI Office will forward the query to the appropriate respondent.

Best of luck on your Instructor journey!

## Registered Instructor Training Program Handbook

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## Instructor Training Program Process & Checklist

Below is a checklist and flow chart for each step of the process to become an Instructor of Ortho-Bionomy.

Detailed directions and descriptions are provided on pages 33-38. All submissions should be typed. Good luck with your journey.

### Application Process for Instructor Training Program (IT)

Applicant must be a Registered Advanced Practitioner or be a Registered Practitioner  $\frac{3}{4}$  of the way through their Advanced Practitioner program. Application is considered complete when SOBI Office receives 5 copies of:

- ◇ Application to Instructor Training Program, including typed answers to Essay Questions (Page 3-4)
- ◇ 2 completed Recommendation Forms (Page 5-8) , 1 from advisor and 1 from a Registered Instructor\*\*
- ◇ Advisor(s) Selection Form (Page 9)
- ◇ Partially completed Advanced Practitioner Program Record Form if the applicant is not already a Registered Advanced Practitioner
- ◇ \$100 Application Fee

Please keep 1 copy for yourself and send 1 copy to your advisor

Application is sent to Instructor Review Committee. You will be notified of the status of your application into the program after next IRC meeting and can attend an ITS after being accepted.\*

### Complete Instructor Training Seminar 1 (ITS I) and bench assists (6 -12)

#### Evolution Process to become Associate Instructor

When complete, send 5 copies of the following to the SOBI Office:

- ◇ Associate Instructor Evolution Request Form (page 10 )
- ◇ 2 Recommendation Forms for Associate Instructor Evolution (page 11-14), 1 from advisor, 1 from Registered Instructor\*\* with whom you have benched
- ◇ Summary of bench assists (date, location, class benched, instructor you worked with.)
- ◇ Completed bench assist evaluation forms, including at least 3 with demonstrations (pages 23-24)
- ◇ \$150 Matriculation Fee. Please note: This fee is the only matriculation fee you will pay. You do not need to pay again when you evolve to Instructor

Please keep 1 copy for yourself and send 1 copy to your advisor

You will be notified of your evolution or if the IRC has additional requirements after next IRC meeting\*

### Complete Instructor Training Seminar 2 (ITS II)

Additional bench assists, co-teaches and other training as recommended by your advisor and trainers.

#### Evolution Process to become Instructor

When complete, send 5 copies of the following to the SOBI Office:

- ◇ Completed Instructor Training Program Agreement (updated after ITS II) (pages 15-16)
- ◇ Completed Instructor Training Program Record Form (pages 17-22), including Advisor signature, bottom of page 22
- ◇ Letter requesting evolution to Instructor
- ◇ 2 completed Recommendation Forms for Instructor Evolution (page 29-32), 1 from advisor, 1 from Registered Instructor\*\* with whom you have co-taught
- ◇ Completed bench assist, co-teach and supervised teach evaluation forms (pages 25-28)

Please keep 1 copy for yourself and send 1 copy to your advisor

You will be notified of your evolution or if the IRC has additional requirements after next IRC meeting

\*The Instructor Review Committee (IRC) meets quarterly, and the submission deadlines are March 15, June 15, September 15 and December 15. The application for Instructor Training Program, Associate Instructor and Instructor evolutions should be sent to the SOBI office at least two weeks prior to the IRC deadline. This gives the office time to notify the applicant if any paperwork is missing and still meet the IRC deadline.

\*\* Registered Instructors providing recommendations must be in good standing with the Society.

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## Application to Instructor Training Program (Page 1)

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_ E-mail \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Phone (Work) \_\_\_\_\_

**Instructor Training Program Enrollment Fee: \$100.00**

Make your check or money order payable to Society of Ortho-Bionomy International (U.S. Dollars). Please do not send cash. You may also pay by Visa or MasterCard.

Visa/Master Card Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

**ADVISOR INFORMATION**

I submit that my advisee is eligible and prepared for instructor training and forms are complete.

Program Advisor \_\_\_\_\_ Signature \_\_\_\_\_

**ELIGIBILITY INFORMATION/CHECK LIST**

\_\_\_ 1. Completion of the Advanced Practitioner Training Program (if incomplete, you may submit a letter from your Advanced Practitioner Program Advisor stating you have completed a minimum of 375 hours of the program and provide a copy of your Advanced Practitioner Program Form)

\_\_\_ 2. Current paid Practitioner or Advanced Practitioner member of the Society of Ortho-Bionomy International

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## **Application to Instructor Training Program (Page 2)**

### **Applicant Essay Questions**

Please type responses to the following questions on a separate sheet of paper:

1. What is your interest in becoming an Ortho-Bionomy instructor?
2. Describe several key learning experiences. What was the role of the instructor or their instruction in these experiences?
3. What do you think your strengths and weakness will be as an instructor? Please assess or comment in regards to the following areas about yourself: communication skills, patience, honesty, discernment, personal integrity, perseverance, commitment to the practice of Ortho-Bionomy, relationship to the Ortho-Bionomy community and the Society of Ortho-Bionomy International.
4. What do you think will be unique to your teaching?
5. As a practitioner, have you served as an advisor to students in the program? If so, what has been your experience in that role? If not, please describe the role your advisor took in your training process. Please comment on the value of that experience in your training process.
6. Describe the role and responsibilities of an Instructor.
7. Describe the roles and responsibilities of an Advisor.

## ADVISOR Recommendation Form for Entrance Into Instructor Training Program (Page 1 of 2)

Trainee Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Registered Instructor giving recommendation: \_\_\_\_\_

Instructions to recommending instructor: Please complete this form and return to the applicant as soon as possible. The application will not be reviewed until all of his/her recommendation forms have been received. Thank you in advance for your participation in the process.

1. How long have you known this applicant? \_\_\_\_\_
2. What is your personal knowledge and familiarity with this applicant?

Ortho-Bionomy Classes \_\_\_\_\_

\_\_\_\_\_

Ortho-Bionomy Sessions \_\_\_\_\_

\_\_\_\_\_

Other (e.g., professional association, other trainings, etc) \_\_\_\_\_

\_\_\_\_\_

3. What are the applicant's:  
Strengths as a Student \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Strengths as a Practitioner \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Advisor Recommendation Form for Entrance  
Into Instructor Training Program Cont'd (Page 2 of 2)**

Trainee Name \_\_\_\_\_ Date \_\_\_\_\_

Registered Instructor giving recommendation: \_\_\_\_\_

- 4. What qualities of the applicant will be suited for becoming an Ortho-Bionomy Instructor?
  
  
  
  
  
  
  
  
  
  
- 5. What areas will be particularly challenging for the applicant in their Instructor Training Process?
  
  
  
  
  
  
  
  
  
  
- 6. Any other comments regarding the candidate's application to the Instructor Training Program?  
(Attach additional sheets if necessary)

---

\_\_\_ I recommend the applicant be accepted into the Instructor Training Program

\_\_\_ I do not recommend the applicant be accepted at this time. Please attach an explanation.

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Instructor Recommendation Form for Entrance Into Instructor Training Program (Page 1 of 2)**

Trainee Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Registered Instructor giving recommendation: \_\_\_\_\_

Instructions to recommending instructor: Please complete this form and return to the applicant as soon as possible. The application will not be reviewed until all of his/her recommendation forms have been received. Thank you in advance for your participation in the process.

1. How long have you known this applicant? \_\_\_\_\_
2. What is your personal knowledge and familiarity with this applicant?

Ortho-Bionomy Classes \_\_\_\_\_

\_\_\_\_\_

Ortho-Bionomy Sessions \_\_\_\_\_

\_\_\_\_\_

Other (e.g., professional association, other trainings, etc) \_\_\_\_\_

\_\_\_\_\_

3. What are the applicant's:  
Strengths as a Student \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Strengths as a Practitioner \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INSTRUCTOR Recommendation Form for Entrance  
Into Instructor Training Program Cont'd (Page 2 of 2)**

Trainee Name \_\_\_\_\_ Date \_\_\_\_\_

Registered Instructor giving recommendation: \_\_\_\_\_

4. What qualities of the applicant will be suited for becoming an Ortho-Bionomy Instructor?

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

6. Any other comments regarding the candidate's application to the Instructor Training Program?  
(Attach additional sheets if necessary)

---

\_\_\_\_ I recommend the applicant be accepted into the Instructor Training Program

\_\_\_\_ I do not recommend the applicant be accepted at this time. Please attach an explanation.

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Advisor(s) Selection Form For Instructor Training Program

**Trainee:**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

\_\_\_\_\_ E-mail \_\_\_\_\_

---

The following Registered Instructor(s) has/have agreed to serve as my Advisor(s) Please print:

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

---

**Instructor(s):** I/we have discussed the training process with the Trainee and have agreed to serve as his/her Advisor(s). Please have Advisor(s) sign below.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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## Associate Instructor Evolverment 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 Associate Instructor. I am currently a registered Advanced Practitioner.

Signature: \_\_\_\_\_

**Associate Instructor Enrollment Fee: \$150 (Note: This fee includes the matriculation fee for both Associate and Instructor).**

### ADVISOR APPROVAL for Trainee to evolve to Associate Instructor

I recommend this student to be evolved to Associate Instructor. Trainee has completed ITS I and 6-12 Bench Assists and is ready to evolve to Associate Instructor.

Advisor Name \_\_\_\_\_ Date: \_\_\_\_\_

Advisor Signature \_\_\_\_\_



**Advisor Recommendation Form for Evolverment  
To Associate Instructor (Page 2 of 2)**

Trainee Name \_\_\_\_\_ Date \_\_\_\_\_

Registered Instructor giving recommendation: \_\_\_\_\_

4. Any additional comments?

---

\_\_\_ I recommend the applicant be appointed as an Associate Instructor

\_\_\_ I do not recommend the applicant be appointed at this time. Please attach an explanation.

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Instructor Recommendation Form for Evolverment  
To Associate Instructor (Page 2 of 2)**

Trainee Name \_\_\_\_\_ Date \_\_\_\_\_

Registered Instructor giving recommendation: \_\_\_\_\_

4. Any additional comments?

---

\_\_\_\_ I recommend the applicant be appointed as an Associate Instructor

\_\_\_\_ I do not recommend the applicant be appointed at this time. Please attach an explanation.

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Instructor Training Program Agreement (ITS Part I)

Instructor Trainee Name: \_\_\_\_\_

\*\*\*\*\*  
ITS Part I                      Date: \_\_\_\_\_ Location: \_\_\_\_\_

ITS Instructor(s): \_\_\_\_\_  
\_\_\_\_\_

Minimum Number of the following are Required :

Bench Assists \_\_\_\_\_

Co-teaches \_\_\_\_\_

Supervised Teaches \_\_\_\_\_

Additional training requirements or agreements:

Estimated Time interval until ITS Part II \_\_\_\_\_

Signatures of ITS Instructors \_\_\_\_\_

Instructor Trainee Signature: \_\_\_\_\_

Advisor(s) Signature(s): \_\_\_\_\_

If your ITS Instructors are different than your Advisor(s), please provide him/her with copies of this training agreement.

## Instructor Training Program Agreement (ITS Part II)

Instructor Trainee Name: \_\_\_\_\_

\*\*\*\*\*

ITS Part II                      Date: \_\_\_\_\_ Location: \_\_\_\_\_

ITS Instructor(s): \_\_\_\_\_

\_\_\_\_\_

### Training Requirements Review:

Bench Assists Completed \_\_\_\_\_

Bench Assists Remaining \_\_\_\_\_

Co-Teaches Completed \_\_\_\_\_

Co-Teaches Remaining \_\_\_\_\_

Supervised Teaches Completed \_\_\_\_\_

Supervised Teaches Remaining \_\_\_\_\_

Additional training requirements completed since ITS Part I:

Additional training requirements remaining from ITS Part I:

Additional training requirements identified from ITS Part II:

Signatures of ITS Instructors \_\_\_\_\_

Instructor Trainee Signature: \_\_\_\_\_

Advisor(s) Signature(s): \_\_\_\_\_

Advisor(s) – Please provide your advisor(s) with an updated copy of your training agreement after ITS II.

## Instructor Training Program Record Form (Page 1)

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_ E-mail \_\_\_\_\_

Phone (Home) \_\_\_\_\_ Phone (Work) \_\_\_\_\_

Advisor(s) \_\_\_\_\_

### Instructor Training Program Curriculum

#### **Completed in Instructor Training Seminars and in Tutorials**

Clarification of Program, Roles & Responsibilities	(4-8 hours)
Demonstration of Teaching	(16-48 hours)
Clarification of Technique	(8-16 hours)
Demonstration of History and Philosophy	(4-6 hours)
Classroom Dynamics (Ethics and Energy)	(16-32 hours)
Business of Teaching	(8-16 hours)
Observation and Discussion of a Class	(20-32 hours)
Tutorial, Feedback and Demo Practice	(6-48 hours)
How to Teach so Students Will Improve	(16 hours)
How to Supervise Trainees	(4-8 hours)
Society's Policies and Ethical Relationships	(4-6 hours)

Suggested Elective: "Comparisons of Ortho-Bionomy to Other Modalities"

#### **Classroom Observation and Experience**

*Please have 1 Self Evaluation Form AND 1 Instructor Evaluation Form filled out for EACH session*

Bench Assisting (6-12 Sessions) Evaluation Form page 23 and 24	(96-192 hours)
Co-Teaching (3-6 sessions) Evaluation Form page 25 and 26	(48-96 hours)
Supervised Teaching (1-2 sessions) Evaluation form page 27 and 28	(16-32 hours)

## INSTRUCTOR TRAINING PROGRAM RECORD FORM (Page 2)

Please indicate if the hours are met in the ITS, an Ortho-Bionomy Class or in tutorial, then give the date, location and number of hours. Please have the instructor you are working with initial your form.

(See "Overview of Forms for descriptions of some sections of the Program Record Form)

<b>Clarification of Program, Roles and Responsibilities</b>	<b>4-8 hours</b>	<b>Initial</b>
ITS Part 1 _____	_____	Hours _____
ITS Part 2 _____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____

<b>Demonstration of Teaching</b>	<b>16-48 hours</b>	
ITS Part 1 _____	_____	Hours _____
ITS Part 2 _____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____

<b>Clarification of Technique</b>	<b>8-16 hours</b>	
ITS Part 1 _____	_____	Hours _____
ITS Part 2 _____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____

<b>Demonstration of History and Philosophy</b>	<b>4-6 hours</b>	
ITS Part 1 _____	_____	Hours _____
ITS Part 2 _____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____

<b>Classroom Dynamics (Ethics and Energy)</b>	<b>16-32 hours</b>	
ITS Part 1 _____	_____	Hours _____
ITS Part 2 _____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____
_____	_____	Hours _____

INSTRUCTOR TRAINING PROGRAM RECORD FORM (Page 3)

Business of Teaching

8-16 hours

ITS Part 1 \_\_\_\_\_ Hours \_\_\_\_\_
ITS Part 2 \_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_

Observation and Discussion of a Class

20-32 hours

ITS Part 1 \_\_\_\_\_ Hours \_\_\_\_\_
ITS Part 2 \_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_

Tutorial, Feedback and Demonstration Practice

6-48 hours

ITS Part 1 \_\_\_\_\_ Hours \_\_\_\_\_
ITS Part 2 \_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_

How to Teach So Students Will Improve

16 hours

ITS Part 1 \_\_\_\_\_ Hours \_\_\_\_\_
ITS Part 2 \_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_

How to Supervise Trainees

4-8 hours

ITS Part 1 \_\_\_\_\_ Hours \_\_\_\_\_
ITS Part 2 \_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_
\_\_\_\_\_ Hours \_\_\_\_\_

**INSTRUCTOR TRAINING PROGRAM RECORD FORM (Page 4)**

**Society's Policies and Ethical Relationships**

**4-6 hours**

ITS Part 1	_____	_____	Hours	_____
ITS Part 2	_____	_____	Hours	_____
_____	_____	_____	Hours	_____
_____	_____	_____	Hours	_____

**Suggested elective: "Comparisons of Ortho-Bionomy to Other Modalities"**

ITS Part 1	_____	_____	Hours	_____
ITS Part 2	_____	_____	Hours	_____
_____	_____	_____	Hours	_____
_____	_____	_____	Hours	_____

**Total Hours of Curriculum Coursework \_\_\_\_\_ Hours**

**Classroom Observation and Teaching Experience**

**Table Assists**

**(6-12)**

**96-192 hours**

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

**INSTRUCTOR TRAINING PROGRAM RECORD FORM (Page 5)**

Classroom Observation and Teaching Experience cont'd

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

**Co-Teaches (3-6) 48-96 hours**

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

**INSTRUCTOR TRAINING PROGRAM RECORD FORM (Page 6)**  
Classroom Observation and Teaching Experience cont'd

**Supervised Teaches (1-2)**

**16-32 hours**

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

Date \_\_\_\_\_ Location \_\_\_\_\_ Course \_\_\_\_\_

Instructor(s) :

---

Advisor Record Form Sign Off:

My signature below verifies that the information on this form is complete and true to the best of my knowledge.

Advisor Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**INSTRUCTOR TRAINING BENCH ASSIST SELF-EVALUATION**

*(Please make multiple copies of this form and use a separate form for each bench assist)*

**Instructor Trainee** \_\_\_\_\_

**Date** \_\_\_\_\_

**Course** \_\_\_\_\_

**Location** \_\_\_\_\_ **Instructor(s)** \_\_\_\_\_

**What were your goals/objectives/focus for this class?**

---

---

---

---

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

---

---

---

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

---

---

---

---

---

---

---

---

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



**INSTRUCTOR TRAINING CO-TEACH SELF-EVALUATION**  
*(Please make multiple copies of this form and use a separate form for each co-teach)*

**Instructor Trainee** \_\_\_\_\_

**Date** \_\_\_\_\_ **Course** \_\_\_\_\_

**Location** \_\_\_\_\_ **Instructor(s)** \_\_\_\_\_

**What were your goals/objectives/focus for this class?**

---

---

---

---

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

---

---

---

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

---

---

---

---

---

---

---

---

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









**Advisor Recommendation Form for Evolverment  
To Instructor (Page 2 of 2)**

Trainee Name \_\_\_\_\_ Date \_\_\_\_\_

Registered Instructor giving recommendation: \_\_\_\_\_

4. Any additional comments?

---

\_\_\_\_ I recommend the applicant be appointed as an Instructor

\_\_\_\_ I do not recommend the applicant be appointed at this time. Please attach an explanation.

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**Instructor Recommendation Form for Evolverment  
To Instructor (Page 2 of 2)**

Trainee Name \_\_\_\_\_ Date \_\_\_\_\_

Registered Instructor giving recommendation: \_\_\_\_\_

4. Any additional comments?

---

\_\_\_\_ I recommend the applicant be appointed as an Instructor

\_\_\_\_ I do not recommend the applicant be appointed at this time. Please attach an explanation.

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## **Instructor Training Program**

### *Overview of Forms*

#### **1. Application to Instructor Training Program and Essay Questions**

This is the application form to enter the Instructor Training Program. It must be completed before attending ITS Part I and sent to the SOBI office to forward to the IRC for review for you to be considered as an Instructor Training Program trainee.

#### **2. Advisor Recommendation Form for Entrance Into Instructor Training Program**

This form is to be filled out by trainee's Advisor recommending that the trainee is ready for the Instructor Training Program.

#### **3. Instructor Recommendation Form for Entrance Into Instructor Training Program**

This form is to be filled out by a Registered Instructor of Ortho-Bionomy recommending that the trainee is ready for the Instructor Training Program.

#### **4. Advisor(s) Selection Form for Instructor Training Program**

This form confirms the trainee's Advisor(s). All Instructor Training Advisors should sign this form. Only 1 Advisor is necessary; however, trainee may wish to work with more than 1 Instructor. An Advisor should be chosen no later than the trainee's 3<sup>rd</sup> bench assist. Please refer to page 41 to review requirements for Advisors.

#### **5. Associate Instructor Request for Evolvement**

This form is completed and sent in to the SOBI office once the trainee has completed ITS I and the other requirements necessary to evolve to Associate Instructor.

#### **6. Instructor Training Program Agreement**

**Part One:** This portion is completed at the end of the Instructor Training Seminar Part One in conjunction with the ITS Instructors and must be reviewed by the Advisor(s). If the Advisor(s) is/are not Instructors of the ITS, then the Instructor Trainee must schedule a discussion with the Instructor(s) as soon as possible after the ITS.

**Part Two:** This portion is completed at the end of the Instructor Training Seminar Part Two in conjunction with the ITS Instructors and must be reviewed by the Advisor(s). If the Advisor(s) is/are not Instructors of the ITS, then the Instructor Trainee must schedule a discussion with the Instructor(s) as soon as possible after the ITS.

#### **7. Program Record Form**

All course work and tutorials including hours of credit from ITS I and II, are recorded on this form and copies are to be included in the final request for Instructor appointment. Some additional detail and clarification on various sections of the program record form are included below:

**Demonstration of Teaching** – in this section, document time spent observing Instructors demonstrating Ortho-Bionomy in the ITS and in classes that you bench or co-teach.

**Tutorial, Feedback, Demonstration Practice** – tutorials are time with instructors to work on any aspect of instructor training. They may include feedback, discussion with/evaluation of how things went in a class that was benched or co-taught, etc.

Demonstration practice is time spent in class or in ITS doing presentations (technique, history, philosophy, principles, concepts).

**Bench Assisting** - A Bench Assist consists of observing, assisting students during practice time and, if permitted by the Instructor, demonstration of techniques. A minimum of three bench assists must be Basic Phase 4 classes e.g. Spine/Extremities. Beyond the minimum of three Phase 4 bench assists, the instructor trainee may choose any basic level classes in the Practitioner Training Program (Phase 4, Isometrics, Exploration of Movement, Posture and Post Techniques, and Self Care) for bench assists. For any additional bench assists beyond six, the trainee and advisor will determine appropriate classes.

The number of bench assists and the number of these with demonstrations is determined at the ITS and in consultation with the Advisor. At least three benches with demonstrations are required.

Multiple observations of classes are recommended for those interested in training as an Instructor. Of these, only one bench assist may be completed for credit before the first ITS, by a candidate who is a Registered Practitioner 2/3 of the way through the Advanced Practitioner Program. A minimum of five bench assists must be completed after the ITS, when the trainee is permitted to demonstrate.

(Note: For those who were enrolled in the ITS program before these guidelines were issued, the limit of 1 bench assist for credit before the ITS may not apply. The supervisor and ITS trainers will set bench assist requirements for the trainee.)

Copies of the bench assist evaluation forms (1 Self Evaluation and 1 Instructor Evaluation for EACH bench assist) should be included in your packet as part of your request for appointment to Associate Instructor. They must be completed in a way that demonstrates the learning and progress that is ongoing in the training and so that they provide clear information for the IRC.

**Co-Teaching** - A Co-Teach consists of co-teaching an Ortho-Bionomy class with a Registered Instructor.

A minimum of two co-teaches must be Basic Phase 4 classes (e.g. Spine /Extremities). An instructor trainee must bench assist the class before co-teaching the class. With advisor agreement, the instructor trainee may choose from basic level classes in the Practitioner Training Program (Basic Phase 4, Isometrics, Exploration of Movement, and Posture and Post Techniques) for the remainder of their co-teaches.

At least three of the co-teaches required as a minimum for Instructor Training, must be classes of two or more days in which the candidate teaches 50% of the class with an eligible Registered Instructor. The trainee must have completed all of his/her Bench Assists, Part One of the ITS, and be appointed an Associate Instructor before s/he is permitted to co-teach. A co-teach cannot be shared with other trainees.

**Supervised Teaching** – A Supervised Teach is an Ortho-Bionomy class presented by the Instructor Trainee and supervised by a Registered Instructor. The number of supervised teaches required beyond the first supervised teach is determined through the recommendation of the Advisor and the supervising Instructor.

The Supervised Teach must be a 16 unit or more Basic Phase 4 class, Spine or Extremities or a combination of both.

During the Supervised Teach, the Trainee is responsible for every aspect of the class. The Instructor supervising will be completely in the role of observing the Trainee's teaching and will be evaluating the Trainee's performance for recommendation to become an Instructor, or to undertake an additional supervised teach.

**8. Instructor Training Bench Assist Self-Evaluation**

A Bench Assist Self Evaluation Form is to be completed by the **trainee** after each bench assist.

**9. Instructor Training Bench Assist Instructor Evaluation**

A Bench Assist Instructor Evaluation Form is to be completed by the **supervising instructor** after each bench assist .

**10. Instructor Training Co-Teach Self-Evaluation**

A Co-Teach Self Evaluation Form is to be completed by the **trainee** after each co-teach.

**11. Instructor Training Co-Teach Instructor Evaluation**

A Co-Teach Instructor Evaluation Form is to be completed by the **supervising instructor** after each co-teach.

**12. Instructor Training Supervised Teach Self-Evaluation**

A Supervised Teach Self Evaluation Form is to be completed by the **trainee** after each supervised teach.

**13. Instructor Training Supervised Teach Instructor Evaluation**

A Supervised Teach Instructor Evaluation Form is to be completed by the **supervising instructor** after each supervised teach.

## Society of Ortho-Bionomy International Instructor Training Policy

### **Reasons for this Policy**

Quality education is one of the highest goals and services of the Society of Ortho-Bionomy International. Whether someone is taking Ortho-Bionomy classes for personal or professional enhancement, they deserve the opportunity to experience Ortho-Bionomy from a well-trained instructor. Instructor Trainees deserve the best education possible to insure that they present Ortho-Bionomy in ways that are both personally and professionally satisfactory and successful.

The Society of Ortho-Bionomy has the legal and functional responsibility to ensure that all instructors receive a quality education and represent Ortho-Bionomy with the highest integrity. The Society has a particular interest in protecting usage of the trademarked term “Ortho-Bionomy.” It is imperative that the Society has appropriate supervision over the training process to guarantee continuity and quality of instruction.

Ortho-Bionomy is a highly creative and evolving form of bodywork that requires room to grow and change. Any Training Instructor must be open enough to stimulate and support creativity and at the same time provide a structure that focuses that creativity. Instructor training should promote individual expressions that are shared in a group and community setting. Instructor training should be open to new solutions but also be cognizant and connected to the successes of the past.

The following Instructor Training Policy attempts to meet the above challenges by creating a clear, fair and flexible process that meets the needs of trainees, the Society and the future students of Ortho-Bionomy.

### **Admission to the Instructor Training Program**

1. To enter the Instructor Training Program, an applicant needs to have fulfilled the following requirements:
  - a) Be a registered Advanced Practitioner of Ortho-Bionomy or have completed a minimum 375 hours of the Advanced Practitioner program (with clear intention to complete the Advanced Practitioner Program within 6 months to 1 year)
  - b) Submit letters of recommendation from 2 instructors that are familiar with the applicants work as a student.
  - c) Submit an application to the Instructor Training Review Committee (IRC).
  - d) Be approved by the IRC to train.
2. The Instructor Review Committee (IRC) consists of 3 Instructor members, including at least one Advanced Instructor. The members are appointed by the Board of Directors and are rotating positions. A 4<sup>th</sup> alternate is also a silent member of the committee and will review a case if the regular committee member is not available to assess a particular case. It is the role of the IRC to review paper work and provide quality assurance of the applicants.
3. If it is the decision of the members of the Instructor Training Review Committee to deny the applicants request for entry into the Instructor Training Program, the applicant and the instructors who have recommended the applicant will be notified in writing. The applicant will have the option of reapplying to the Instructor Training Program after a 6 month period.

### **Instructor Training Policy Cont'd.**

4. Prior approval by the IRC for the Instructor Training Program is required before taking the Instructor Training Seminar (ITS). Trainees who take an Instructor Training Seminar without prior approval will be considered auditors and not awarded credit for the Seminar.
5. A trainee must pick an Advisor to oversee their training experience as soon as possible but at least by the time of the 3<sup>rd</sup> bench assist.
6. A trainee must complete an Instructor Training Seminar form and get all required signatures. After each bench assist, co-teach and supervised teach, all Instructor Trainees must complete an appropriate form and get a signature from the instructor.

### **Instructor Training Seminar (ITS)**

1. Most of the curriculum for the Instructor Training will be included as topics covered in the Instructor Training Seminar. Tutorials in addition to the ITS may supplement and complete the requirements.
2. An approved Instructor Training Seminar is required by all students enrolled in the Instructor Training Program.
3. The Instructor Training Seminar is divided into 2 segments (ITS I and ITS II) separated by a gap of at least 6 months. The first segment can be taken as the first step in the Instructor Training Program, or following some class observation or bench assist experience. It is a prerequisite for ITS II. The second segment may be taken after completing bench assists with presentations. Of these bench assists, only one will count for credit before completing ITS I.
4. If invited by an Instructor, an Advanced Practitioner or a Registered Practitioner enrolled in the Advanced Practitioner Program who has completed 375 hours of that program may begin bench assisting; however, no classroom presentations are permitted until the Trainee has attended ITS I.
5. Instructor Trainees may not co-teach until they have been appointed Associate Instructors.

### **ITS Instructors and Instructor Trainee Supervision**

1. Instructor Trainees may bench with a Registered Instructor who has a minimum of one year active teaching experience (6-10 classes per year). Instructor Trainees may co-teach and do their supervised teaching with an Instructor who has a minimum of 2 years active teaching experience (6-10 classes per year).
2. In order to supervise a trainee throughout their training process (as their Advisor) an instructor needs a minimum of 2-3 years active teaching experience (6-10 classes per year).
3. ITS trainers must include at least one instructor who has previous experience teaching an ITS and one advanced instructor. Each trainer must have a minimum of 2-3 years teaching experience.
4. ITS trainers should fill out and return an Instructor Agreement Form and submit a proposal for training to SOBI before running an ITS so that it can be an approved ITS. The agreement forms are available from the SOBI office.

## Instructor Training Policy Cont'd

### Becoming an Associate Instructor

1. See checklist on page two of the Instructor Training Program Handbook
2. Trainee must be approved as a Registered Advanced Practitioner
3. Trainee must have completed ITS I
4. Trainee must have completed bench assists and bench assists with classroom demonstrations as required by their Advisor and trainers. A minimum of 3 of the bench assists must include demonstrations.
5. Trainees must be recommended to become Associate Instructors by the Advisor and another registered instructor in good standing with whom s/he has benched.
6. All application materials are submitted to IRC quarterly. The SOBI Office will notify the trainee and his/her Advisor of the trainee's appointment as an Associate Instructor or a requirement for further training prior to the next quarterly IRC meeting.

Note: Trainee may not co-teach prior to appointment by the IRC to Associate Instructor.

### Final Appointment to Instructor

1. It is the responsibility of the Advisor to review and confirm that the curriculum's requirements have been met before recommending an Associate Instructor evolution to Instructor.
2. The Associate Instructor must complete the training requirements, forms, and written recommendations (one from Advisor and one from a SOBI registered instructor with whom you've done classroom training) and submit all documentation to the SOBI Office.
3. Please note that any publicity for the supervised teach must clearly identify it as a supervised teach and not present the candidate as an Instructor. A supervised teach must be in person. Video taped supervised teaches are only allowed under rigorously defined conditions. Please contact office for description if needed.
4. The IRC will examine and assess the information contained in the trainees file  
A completed file will include:
  - Instructor Training Program Record Form
  - All completed Evaluation Forms for each bench assist, co-teach, and supervised teach. It is required to co-teach or bench with at least two instructors.
  - Recommendation forms from 2 registered SOBI Instructors in good standing with whom you have worked in your training, preferably from instructors with whom you have co-taught or done a supervised teach. One of the recommendations must be from your Advisor.
  - Completed Instructor Training Program Agreement
  - Letter requesting evolution to Instructor

The IRC will verify the completeness of the file, and also conduct a qualitative examination of the records. It will review the recommendations, evaluations of the trainee, the trainee's self-evaluations and other parts of the application and records to indicate the readiness of the candidate to become an Instructor. On occasion, the IRC may also request and consider collateral information from instructors who have worked with or taught the candidate that may be relevant in making a decision. The Instructor Review Committee will recommend appointment of the applicant as Instructor, or additional requirements for the candidate to the Board of Directors.

5. Final appointment to Instructor will be made by the Board of Directors of the Society of Ortho-Bionomy upon recommendation by the IRC.
6. It is recommended that all new Instructors send a letter of self-introduction to the entire instructor community announcing their evolution as an Instructor.