

**Society of Ortho-Bionomy International®**  
**Advanced Instructor Training Program** effective 10/18/2011

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# **Purpose of the Advanced Instructor Training Program**

The purpose of this training program is to qualify advanced instructors to commence teaching Phases 5, 6 and 7, and related advanced classes, as part of the practitioner training programs of the Society of Ortho-Bionomy International.

The Society of Ortho-Bionomy Inc. is bound to protect its Trademark by offering professional training programs. These programs help to ensure that the integrity of the work may be passed on to future generations. Understanding that Ortho-Bionomy is a process of learning and can evolve through the years, this program is meant to cover the fundamental aspects of training our Advanced Instructors, while still allowing for the individual expression of each person.

This program helps to encourage:

The "being-ness" of Ortho-Bionomy which Arthur said is “caught” and not “taught”, by which students grasp the heart of the work and which predominates in relationship to the students, fellow instructors and the wider community.

The development of the skills, awareness and wisdom required to convey the spirit and totality of the principles of the work and to promote each student's individual embodiment of O-B.

A platform of professional dialogue, training and evaluation for the coherent presentation of the energetic aspects of Ortho-Bionomy.

Skills needed for energetic tracking and classroom interaction while providing students with an understanding of the practical and clinical applications of the whole of Ortho-Bionomy.

The capacity for discernment through neutral observation and advancing the skills of recognition, timing, approach and ways of offering options to expand the learning of the students as individuals as well as teaching to the group.

## **Prerequisites to Enter the Advanced Instructor Training Program (AITP):**

1. 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)

2. Discussion with Advanced Instructors (minimum two) to determine trainee's readiness & instructors' participation, with review of entrance essay questions. (page 6)

3. Submission of application portfolio with required fee. (pages 5-7)

## Curriculum Guidelines

AITS optional but highly recommended, optimally near the beginning of this part of the advanced training.

### **Phase 5 Training\***

- 2 bench assists (observations are also advised)
- 2 co-teaches
- 1 supervised

Application to evolvment to Associate Advanced Instructor

### **Phase 6 Training\***

- 2 bench assists (observations are also advised)
- 2 co-teaches
- 1 supervised

Application to evolvment to Advanced Instructor

### **Notes for both Phase 5 and Phase 6 training \*:**

Self-assessment by candidate and assessment by Advisors & Supervising Instructors happens throughout program and is documented in applications and on bench assist, co-teach and supervised teach forms. This gives the candidate several opportunities for feedback and evaluation.

These are meant to be minimum guidelines with the actual process to be decided by the trainers and the advisors. The timeline may overlap as Phase 6 classes come up between Phase 5 co/ or supervised teaches.

All above coursework is based on 16 or more unit classes. Classes under 16 units that a trainee may choose to participate in are considered additional coursework beyond the minimums above. Trainee's advisors may require more than the stated minimums. Residentials will be counted as one experience rather than two or three classes.

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

## Transition

For those who are already in the process of advanced training at the time of the effective date of this program:

- You do not have to apply if you are already in advanced training
- Your current title stays the same until you evolve as per this program
- All training **prior to the effective date** of this program applies to the requirements of this program. Letters from your advisors documenting what requirements have been fulfilled will substitute for bench forms; however these classes need to be listed on the program record form.
- All training you do **after the effective date** of this program needs to be documented using the forms in this program.

## **Application and Evolvment Process**

### **Apply to the office**

Application and fee

Application questions from Arthur Lincoln Pauls, Additional Essay Question

2 letters from Advising Advanced Instructors

Review by the IRC

### **Acceptance into AITP, begin Phase 5 training**

Bench assists, optional AITS, co-teaches and supervised teach

### **Apply for Evolvment to Associate Advanced Instructor with Advisors' Approval**

Program Record form page 1

Program Agreement Form Phase 5

All Trainee Class Self Evaluation Forms

All Instructor Class Evaluation Forms

Evolvment to Associate Advanced Instructor Request Form - (2) from Advising Instructors

Recommendation Forms - (2) from Advising Instructors

Review by IRC

### **Evolvment to Associate Advanced Instructor, continue with Phase 6 training.**

Bench assists, co-teaches and supervised teach

### **Apply for Evolvment to Advanced Instructor**

Office Matriculation fee

Program Record form pages 1 and 2

Program Agreement Forms Phase 5 and Phase 6

All Trainee Class Self Evaluation Forms Phase 5 and Phase 6

All Instructor Class Evaluation Forms Phase 5 and Phase 6

Evolvment to Advanced Instructor Request Form - (2) from Advising Instructors

Recommendation Forms - (2) from Advising Instructors

Review by IRC

### **Evolvment to Advanced Instructor**

## **Evolvment Guidelines to Qualify to Teach Other Advanced Courses:**

Associate Advanced Instructors may elect to add Chapman's & Visceral classes. This process must include bench assist, co-teach, and have Advisor approval to teach each of these courses.

Advanced Instructors may elect to add Ethics and Emotions, Phase 7, Cranial, Residential, Instructor Training Seminar (ITS), Advanced Instructor Training Seminar (AITS). This process must include bench assist, co-teach, and have Advisor approval to teach each of these courses.

# **Application to Enter Advanced Instructor Training Program**

Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_  
Country \_\_\_\_\_ E-mail \_\_\_\_\_  
Phone (Home) \_\_\_\_\_ Phone (Work) \_\_\_\_\_

## **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

Please 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.

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_

Signature \_\_\_\_\_

Security Code \_\_\_\_\_

## **Essay Questions from Arthur Lincoln Pauls to Enter AITP**

(Please type questions and responses on separate page)

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 “Evolvement 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. 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: \_\_\_\_\_

# 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 \_\_\_\_\_ Date \_\_\_\_\_

## 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	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

## 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: \_\_\_\_\_

# 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: \_\_\_\_\_

## **Trainee Self-Evaluation Guidelines For Reflection**

**NOTE:** This form does NOT need to be turned in with your portfolio. It is offered as a tool in your self-evaluation process.

1. What would you describe as the dynamics and your feelings in working with the students? Were you able to stay grounded? Did you notice the different moods of Phase 4, Phase 5 or Phase 6? Did you notice the difference in your students' moods? Attention spans?
2. How would you characterize your interactions with the Instructor in terms of flow, comfort and compatibility?
3. What was and was not comfortable regarding the teaching and the interaction with the Instructor and students?
4. In what ways were you able to demonstrate the principles of Ortho-Bionomy which allowed the students to move from Phase 4 to Phase 5 to Phase 6? Could you maintain your sense of time and pacing?
5. What did you notice around your desire to cooperate and to control in regard to the students and the Instructor? What were/are your strengths? Your challenges?

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

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

# Instructor Evaluation Form

(Please make multiple copies of this form and use a separate form for each evaluation and have ready for the instructor you are working with. If more space is needed, please attach additional sheets.)

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

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

Number of units/hours \_\_\_\_\_ Number of students in class \_\_\_\_\_

This was a: Phase 5 \_\_\_\_\_ Phase 6 \_\_\_\_\_ Other \_\_\_\_\_

Observation \_\_\_\_\_ Bench Assist \_\_\_\_\_ Co-Teach \_\_\_\_\_ Supervised Teach \_\_\_\_\_

Instructor's observations, feedback and suggestions:

Supervising Instructor 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

**Note: submit 5 copies of this form and Training Program Agreement, all trainee evaluation and instructor evaluation bench assist forms, letters of Recommendation Forms and Program Record Form to office. 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?

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

**Note: submit 5 copies of this 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.**

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: \_\_\_\_\_