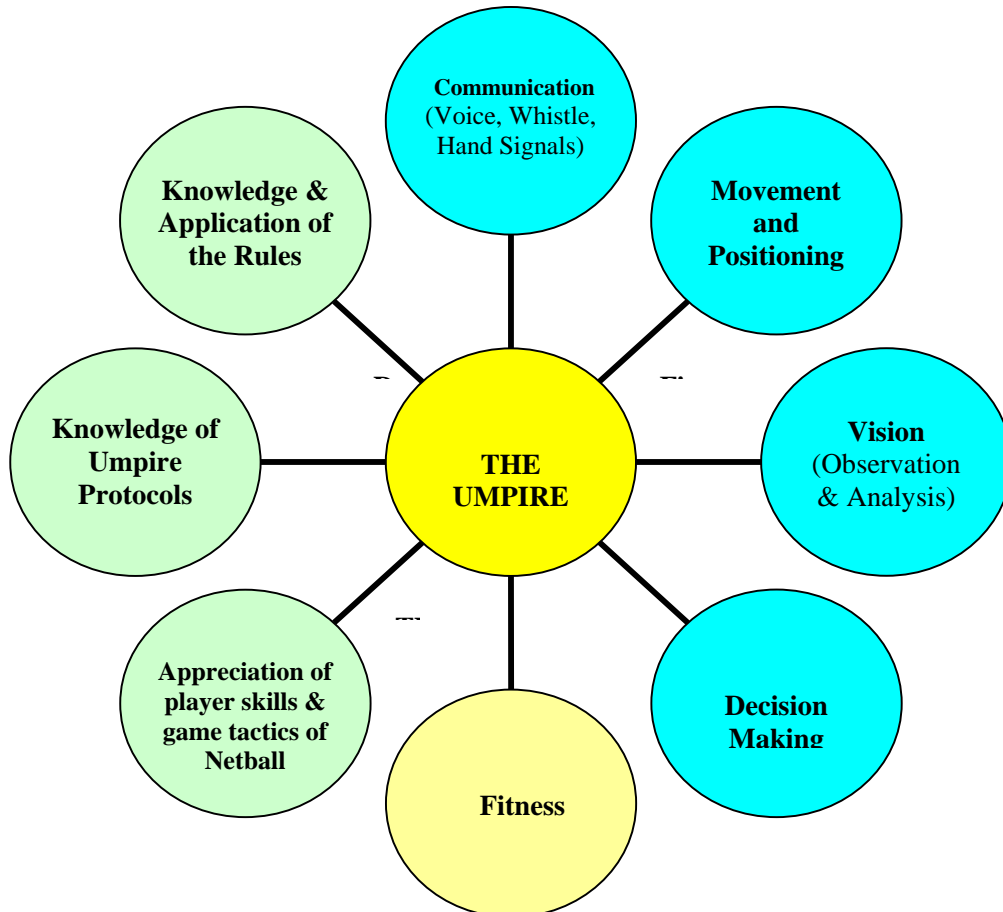


## **APPENDICES**

- Appendix 1 - Model of an Umpire
- Appendix 2 - Initial Meeting – Mentor Agreement Sheet
- Appendix 3 - Review and Reflection Sheet
- Appendix 4 - Practical Session – Master Sheet
- Appendix 5 - Observation/Analysis/Evaluation and Feedback Sheet – Mentor Use
- Appendix 6 - Self Reflection Sheet – Umpire (Mentee)
- Appendix 7 - Medical Form
- Appendix 8 - Photography Form

## MODEL OF A NETBALL UMPIRE

SKILLS! KNOWLEDGE! APPLICATION!



AS THE UMPIRE DEVELOPS THESE AREAS WILL BECOME MORE REFINED

Goals for Young Umpires: What are you helping them achieve?

- THE 6 B'S:
  - Be calm;
  - Be confident;
  - Be clear;
  - Be decisive;
  - Be fair;
  - Be sensible.

**INITIAL MEETING OF MENTOR AND MENTEE – MENTORING AGREEMENT Appendix 2**

<b>Name Of Mentee</b>	
<b>Name Of Mentor</b>	
<b>Date Of Initial Meeting</b>	

**AIMS AND OBJECTIVES OF MENTORING PROCESS**

**Mentee:**  
(What I hope to achieve through the mentoring partnership.....)

**Mentor:**  
(I will provide help in the following ways.....)

**GOAL SETTING**

: Long Term Goals: (1year or more)	
------------------------------------	--

Medium Term Goals: (6Months)	
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Short Term Goals: (1-3months)	
-------------------------------	--

Concerns of Mentee:	
---------------------	--

**ORGANISATION AND GROUND RULES**

Method of contact – phone, email, etc.?	
---	--

How often to meet, weekly, monthly?	
-------------------------------------	--

Where to Meet?	
----------------	--

How long will session last?	
-----------------------------	--

Method of record Keeping?	
---------------------------	--

--	--

**REVIEW**

When – 6months, 1 year	Date:
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**We agree to try to achieve the above:**

Signed:	Mentee:
---------	---------

	Mentor:
--	---------

## REVIEW AND REFLECTION SESSION

Appendix 3

### Key Questions?

- Have we got a good rapport?
- Are we achieving our aims and goals?
- Are we experiencing any difficulties? What are they?
- Do we need to try any new approaches?
- Do we need to alter the long, medium or short term goals?
- Do we need support from anywhere?
- Do we need any further information?
- Have we completed everything we can and as a result, do we need to end the mentoring?

### Comments:

--

### We agree to try and achieve the above:

Signed:

Mentee:

Mentor:

Date:

**PRE MATCH DISCUSSION**

<b>Agreed Focus of Observation:</b>	
1.	
2.	
3.	

**POST MATCH – OBSERVATION, ANALYSIS AND EVALUATION**

<b>Agreed Areas of Strengths Identified:</b>	
1.	
2.	
3.	

<b>Agreed Areas of Development Identified:</b>	
1.	
2.	
3.	

<b>Agreed targets:</b>	
1.	
2.	
3.	

<b>Date of Next Session:</b>	
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<b>Signed:</b>	<b>Mentee:</b>
	<b>Mentor:</b>

**MENTOR – OBSERVATION, ANALYSIS AND FEEDBACK PREPARATION SHEET**

UMPIRE: \_\_\_\_\_ MENTOR: \_\_\_\_\_

<b>Health and Safety</b>	

<b>Communication (Voice, Whistle, Hand Signals)</b>	

<b>Movement &amp; Positioning</b>	

<b>Vision &amp; Decision Making (Observation&amp; Analysis)</b>	

<b>Knowledge &amp; Application of the Rules / Protocols</b>	

<b>Feedback Preparation</b>	
Strengths:	Development:

**UMPIRE SELF REFLECTION SHEET**

**Appendix 6**

**UMPIRE NAME:** \_\_\_\_\_ **OBSERVER NAME:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

***Complete BEFORE Match***

**WHAT DO I WANT TO WORK ON TODAY?**

***Complete AFTER Match***

**WHAT PLEASED ME ABOUT MY UMPIRING?**

**WHY DID IT GO WELL?**

***Complete AFTER Match***

**WHAT WOULD I HAVE LIKED TO HAVE DONE BETTER?**

**WHAT DO I NEED TO DO TO IMPROVE?**

***Complete AFTER Match WITH Mentor***

**WHAT NOW? (AND WHO CAN HELP?)**

**UMPIRE SIGNATURE:** \_\_\_\_\_

**OBSERVER / MENTOR SIGNATURE:** \_\_\_\_\_



## MEDICAL AND ACCIDENT FORM

### PERSONAL DETAILS

Name of Daughter	
Address	
Post Code	
Date of Birth	

### EMERGENCY CONTACT DETAILS

Name of Contact	
Emergency Telephone Number / s	

### MEDICAL HISTORY

Does your daughter have any specific medical condition/s requiring medical treatment and/or medication? If YES, please give details	YES / NO
Does your daughter have any allergies? If YES, please give details	YES / NO
Does your daughter take any medication for asthma? If YES, please give details	YES / NO

It may be essential at some time for the Mentor or a Member of the Programme accompanying your daughter to have the necessary authority to obtain any urgent treatment which may be required whilst attending the Talented Youth Umpire Programme. Would you therefore complete the details on this form and sign below to give your consent.

I, \_\_\_\_\_ being parent/guardian of the above named child hereby give permission for the Mentor or Member of the Programme to give the immediately necessary authority on my behalf for any medical or surgical treatment recommended by competent medical authorities, where it would be contrary to my son/daughter's interest, in the doctor's medical opinion, for any delay to be incurred by seeking my personal consent.

Signature: \_\_\_\_\_ Parent / Guardian

Print Name: \_\_\_\_\_

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





## PHOTOGRAPHY CONSENT FORM

The use of the video camera will prove to be an essential training aid in the umpire development of your daughter.

Netball South West would like to assure you that video and zoom lens photography will ONLY be taken:

- With the permission of your daughter
- In order to provide evidence and feedback related to her umpire development
- Film taken will only be used by your daughter and her mentor, unless permission is given by you ( the parent / guardian) for the film to be used as an example of good practice in a training environment.
- All tapes will remain the property of your daughter

Please sign below if you have read the above and you are comfortable that Netball South West have put into place all necessary precautions to ensure the safety and esteem of your daughter.

-----  
**PHOTOGRAPHY CONSENT FORM**

On behalf of my daughter ....., I give my permission for video photography to be used as long as its' use complies with the above statements.

Signed: .....

Print Name: .....

Please return to:

## **THE ROLE OF THE MENTOR AND MENTEE**

### **What is the role of the mentor?**

The mentor's role is to:

- Act as a 'critical friend' and confidante - having the ability to challenge and empathise
- Build a relationship based on trust to foster learning
- Act as a sounding board to explore ideas
- Act as a signpost to other forms of support as required

### **What is the role of the mentee?**

The mentee has a clear responsibility in ensuring the success of the mentoring support. The following behaviours are suggested to aid this process:

- Proactivity in delivering the agenda – knowing what to discuss and explore in the mentoring partnership. Taking responsibility to achieve any learning and development of goals identified.
- Respect – valuing the opinions and experience of the mentor and exhibiting self-respect
- Ability to communicate – to listen and disclose and participate in discussion
- Openness – to new ideas, to explore issues and to receive constructive feedback
- Commitment – a positive attitude to enable the partnership to develop and grow and be of mutual benefit.
- Self-awareness – an ability to 'look into the mirror' and see strengths and acknowledge areas for development.