PLAYWORKS

Setting Up the Junior Coach (JC) Program

The youth-led Junior Coach Program is the bridge that takes all of the tools adults know about creating safe and inclusive spaces and passes them onto the youth. Youth have less life experience, but they often have deeper insights into the needs and the happenings on the playground.

Your Recess Team will provide guidance and support to Junior Coaches that will help them with their own personal development, increased ownership over the playground, and an understanding that they often have the answers, or know how to find the answers to problems, on their own. Providing Junior Coaches with ongoing training and a clear, meaningful incentive system will give them the necessary tools to develop the confidence and knowledge they need to take ownership over the playground.

JC Program Goals

- **Shared Leadership between Youth Leaders and Recess Staff**: Recess Staff and Junior Coaches both feel a sense of ownership of recess objectives and work together to achieve these objectives.
- **Leadership Skill Development**: Recess Team continuously works with students to develop their leadership skills. The skills are utilized first at recess and then move into the classroom and the school.

JC Selection and Application

- Students are usually in the 4th or 5th grade, and serve for the entire year.
- The number of students in the program depends on the number of jobs at recess and the scheduling of the students.
- Students may be hand selected, or may go through an application process.
- Students can assist with their own recess (peer leadership), or with the recess of younger students.

Junior Coach Set Up

- ❏ Select 12-15 upper grade students to serve as JCs (application - English/Spanish)
- ❏ Notify parents (see parent letter template)
- ❏ Collect JC emergency contact forms
- ❏ Collect permission slips for JC's to attend JC training (after school)
- ❏ Collect Playworks general release forms
- ❏ After Recess Reboot, create and share the JC recess duty schedule

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Parent Letter Template: Junior Coach Program Invitation

Please introduce the Junior Coach Program to parents of your selected Junior Coach student leaders! Here is a parent letter template:

Dear Parent,

I am excited to share that our school is partnering with Playworks from [Monday, 2/6 - Thursday, 2/9] to help reboot our recess!

We are proud to partner with Playworks to make recess a fun time for every student in our community. Playworks is the leading national nonprofit using play to transform schools. A Playworks recess creates a place for every kid on the playground to be active and build new skills. You can learn more at www.playworks.org.

Get Excited!
Playworks Trainer, Coach _____, will be at our school on Monday - Thursday from Nov 6 - Nov 9, 2018. His/her main focus during will be to help us assess and set goals for our school recess, provide our staff with additional professional development, as well as launch and demo best practices that will help bring safe and healthy play to our school! During the week, staff and students will learn new skills and expectations for safe and fun recess games and activities.

Congratulations!
Your child, _____, has been selected to participate in the Junior Coach Program as a Junior Coach. The Junior Coach program is a youth leadership program for 4th-6th graders to support recess and make a positive impact at their school. It is an exciting opportunity for self-esteem building, responsibility teaching and leadership training.

Your child will receive **2 hours of training** on _____ by the Playworks Trainer. Junior Coaches will participate in team building activities and games to learn about conflict resolution, leadership, and recess game facilitation. Junior Coaches are responsible for leading activities at recesses for younger students.

Here are some Playworks resources:

- Recess Reboot Overview
- Choose Play
- Why We Play
- Junior Coach Program

Thank you for your support and please join me in welcoming Coach __ to [School Name]!

Sincerely,

[Principal Name]

Junior Coach Program

Student Emergency Contact & Medical Information

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STUDENT NAME: _____ **Date of Birth:** _____

Student's School: _____ Teacher_____

Student's primary address: _____

PRIMARY GAURDIAN NAME: _____

home number: _____ work number: _____

cell phone: _____ E-mail: _____

OTHER GUARDIAN NAME: _____

home number: _____ work number: _____

cell phone: _____ E-mail: _____

EMERGENCY CONTACT NAME: _____

Home/cell number(s): _____ work number: _____

Health Care Provider/Medical Insurance: _____

Phone: _____ Policy number: _____

Release of Liability

I give permission for the following child to participate in the Junior Coach Program. Name: _____

In case of illness or accident, permission is granted for emergency treatment to be administered. I consent to the program supervisor (s) taking, arranging for and consenting to the emergency procedures. I take full responsibility for, and will pay the costs of any such medical procedures or treatment. I understand that sports can be dangerous, and that serious accidents and injuries can sometimes occur.

I hereby advise that the above named minor has the following allergies, medicine reactions or physical conditions which should be made known to a treating physician:

_____

(If none, please write the word "none.")

With the exception of any condition(s) set forth above, I hereby certify to the best of my knowledge and belief that the child is in good health. I release and waive, and further agree to indemnify Playworks, the Board of Education, the individual members, agents, employees and representatives thereof, as well as program supervisors from and against any claim which I, any other parent or guardian, any sibling, the student, or any other person, firm, or corporation may have or claim to have, known or unknown, directly or indirectly, for any losses, damages, or injuries arising out of, during, or in connection with the student's participation in the program and related activities or the rendering of emergency medical procedures or treatment, if any, including those resulting from negligence.

Please understand that your signature also includes permission for your child to appear in photographs or videotape of the Junior Coach Program and to participate in any assessments of your child's progress.

Guardian Name: _____ **Phone:** _____

Signature: _____ **Date:** _____

Junior Coach Program: Training Permission Slip

REMINDER:

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Your child, ________________________________, will be participating in a Junior Coach training this week!

Location:
Date:
Start time:
End time:

The Junior Coach program is a program designed to build self-esteem, teach responsibility, and develop leadership skills. It is an exciting opportunity for your child to have a role of leadership and to positively impact their school. Your child will be trained by the Playworks Trainer to help maintain the school playground equipment, distribute the sports equipment at recesses, put it all away when the recess times are over, lead sports, games during recess, model conflict resolution and exhibit leadership qualities on the recess yard. While fulfilling their duties, your child will learn the basics of running a sports program. They will learn primary job skills like showing up, taking care of business, and cleaning up after themselves. In setting up games and activities and helping other children play them, your child will learn oratorical techniques, negotiation skills, organizing and problem solving. This is a wonderful opportunity for your child to develop life skills that can be taken to middle school and into the rest of their lives.

Thanks for your support!

- -

Please have your child return this section to the Playworks staff person.

I__________________________ give my child_______________________ permission to stay after school to participate in the Junior Coach training.

When the program is over, my child will: __ walk home __ be picked up

Who is authorized to pick your child up from school?

1. ____

2. ____

Parent/Guardian Signature: ____________________________Date:____________________

PLAYWORKS GENERAL RELEASE FORM

I consent to have my child videotaped, photographed and interviewed while they are participating in Playworks activities at their school. I agree that this program material may be edited as desired, duplicated and used in whole or in part throughout the United Stated and abroad. I consent to the use of my child's name, likeness, voice, and biographical material for program publicity and institutional promotional purposes (including, but not limited to newspaper articles with photos, press releases for Playworks events, promotional videos representing the organization, photos for the Playworks website and social media properties, photos for archival records and documentation

for funders).

By providing the requested information and by signing as parent or guardian on the reverse side of this form, I expressly release Playworks, its licensees and assignees, from any claims I may otherwise have arising out of broadcast, exhibition, publication or promotion of this program material.

FORMULARIO DE AUTORIZACIÓN GENERAL DE PLAYWORKS

Por medio de la presente, doy mi consentimiento para que mi hijo(a) sea videograbado, fotografiado y entrevistado al participar en actividades de Playworks en su escuela. Me doy por enterado(a) que el material de este programa puede ser editado como se desee, duplicado y utilizado parcialmente o en su totalidad a través de los Estados Unidos y en el extranjero. Acepto que se use el nombre de mi hijo(a), su fisonomía, voz y datos biográficos con el propósito de publicitar el programa o promocionar la institución (incluyendo, aunque no limitado a artículos de prensa con fotos, boletines de prensa para eventos de Playworks, videos representando la organización, fotos para la web Playworks y sitios de medios sociales, fotos para el archivo y documentación para solicitar inversionistas.)

Al proporcionar la información requerida y firmar como padre o tutor en el reverso de este formulario estoy expresamente renunciando a todo reclamo que pudiese tener en el futuro contra Playworks, sus licenciados o asignados, por concepto de la difusión, exhibición, publicación o promoción de este material programático.

_____

School/ Escuela Grade/Grado

_____

Teacher/ Maestro(a)

_____

Please print Child's complete name / Escriba el nombre complete del niño(a) en letra de imprenta

_____

Name of parent or Guardian / Nombre del (P)Madre o Tutor

_____

Signature of Parent or Guardian / Firma del (P)Madre o Tutor

_____

Street Address City, State, Zip Code / Domicilio: Número, Calle, Ciudad, Estado, CP

_____

Telephone/Teléfono **Date/ FechA**