



U.S. Paralympics Emerging Sport Program Personal Quarterly Performance Plan

This form can be filled out electronically or by hand

Please Note: If you have a coach, his/her signature is required at the end of this form

Athlete: _____

Date: _____

Sport: _____

Classification: _____

Home Coach: _____

Home Club/Team: _____

Athletes and home coaches agree to maintain an open line of communication with the U.S. Paralympics Emerging Sport Program Manager and to submit daily training logs and competition results every quarter. The format for the training logs is open, but the following information that **MUST** be included:

- Training session type and intensity ● Training session daily goals ● Training session scores and/or times
- Training session duration and/or distance ● Coaches' comments

COMPETITIONS PARTICIPATED IN DURING LAST 3 MONTHS

Major Competitions

<u>EVENT</u>	<u>DATE</u>	<u>LOCATION</u>	<u>RESULTS</u>

Local Competitions with Home Club/Team

<u>EVENT</u>	<u>DATE</u>	<u>LOCATION</u>	<u>RESULTS</u>

Training Plan – Next 3 Months

Planned number of sport specific training sessions per week: _____

Planned number of dryland/weights/cardio/strength sessions per week: _____

Please describe dryland/weight/cardio/strength program below:

(use additional sheet if more space is needed)

Number of planned major breaks during the year: _____
(include all breaks 1 week or longer)

Please list all planned break periods below:

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COMPETITIONS PLANNED DURING NEXT 3-6 MONTHS

Major Competitions

<u>EVENT</u>	<u>DATE</u>	<u>LOCATION</u>	<u>RESULTS</u>

Local Competitions with Home Club/Team

<u>EVENT</u>	<u>DATE</u>	<u>LOCATION</u>	<u>RESULTS</u>

By checking this box, I (athlete) _____ certify that the above information is correct

COACHES' REMARKS

Home Coaches: Please list any other pertinent information regarding ATHLETE's training/competition plan for 2011 that the U.S. Paralympics Emerging Sport staff should be aware of:

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(use additional sheet if more space is needed)

By checking this box, I (coach) _____ certify that the above information is correct.

For US Paralympic Emerging Sport Manager Use:

Date Reviewed:

Comments:

Initial: