

REFORMER WORK PLACEMENT LOGBOOK

PART 1 | SUBMISSION COVER PAGE

Full Name:	
Contact Number:	
Email:	

CHECK POINT

- ⇒ Cover sheet including your full name.
- ⇒ Cover sheet signed and dated.
- ⇒ You have engaged and gained at least one (1) Supervisor declaration and they (or one of them) have completed the Supervisor Report.
- ⇒ You have completed and submitted required Teaching and Observation hours for your Course or Pathway.
- ⇒ Supplementary Evidence (optional): include a **certificate of currency to evidence Insurance**. This applies only to Students who have completed teaching practise from home due to accessibility challenges.

CANDIDATE SIGN OFF AND DECLARATION OF AUTHENTICITY

My signature below confirms the following:

1. I have read the guidelines and instructions for this logbook submission.
2. I choose to be assessed at this time.
3. I have kept a copy of this logbook for my own records.
4. I understand my logbook will not be returned to me and I will just receive feedback from my Assessor on these tasks.
5. I declare that this logbook is my own work and contains no material written by another person except where I have duly referenced. I am aware that making a false declaration may lead to a "Not Yet Competent" grade being given and or a withdrawal of the qualification.

Student's Signature:	
Date of Submission:	

REFORMER WORK PLACEMENT LOGBOOK

PART 2 | SUPERVISOR DECLARATION + FEEDBACK

INSTRUCTIONS

A Supervisor is a Pilates Instructor who currently works at an affiliated or host Work Placement Studio and who has witnessed that you have attended; participated; or carried out Work Placement. They ensure that Students gain hands-on experience, provide feedback, and support the Students in applying their theoretical knowledge to real-world scenarios. The Supervisor plays a critical role in assessing the Students' progress and helping them develop their professional skills in a supportive environment.

HOW MANY SUPERVISORS CAN I HAVE?

You are required to have a *minimum* of one (1) Supervisor, or you can have multiple over the duration of your Coursework.

Learn more about Work Placement Supervisors in the Knowledge Base Library:

- ⇒ [How to: Find a Work Placement Supervisor.](#)
- ⇒ [What to expect from your Supervisor.](#)
- ⇒ [How to: Ask an Instructor to be your Supervisor.](#)
- ⇒ [What can my Supervisor sign off on?](#)

REFORMER WORK PLACEMENT LOGBOOK

SUPERVISOR DECLARATION

I have the qualification, or Pilates Industry experience to provide third party observation for the above Student's logbook of Instructional activities. I was present when the above Student performed the below activities, and the activity was performed safely and to industry standards.

Supervisor's Full Name:			
Name of Work Placement Studio:			
Supervisor's Signature:		Date:	

ADDITIONAL SUPERVISOR DECLARATION

Supervisor's Full Name	Place of Work (Studio)	Signature	Date

REFORMER WORK PLACEMENT LOGBOOK

SUPERVISOR FEEDBACK: STUDENT PARTICIPATION AND PERFORMANCE				
SUPERVISOR NAME:		DATE:		
WORK PLACEMENT SITE:				
STUDENT NAME:				
COURSE:				
SUPERVISOR SIGNATURE:		DATE:		
Thank you for giving your time as a Supervisor for Students studying a Pilates ITC qualification. We are committed to the continuous improvement of our courses and would appreciate feedback on the Student's participation and performance. Please answer the following questions and your response will be returned directly to the RTO with the Student's logbook submission. <i>This feedback is confidential between yourself and the RTO.</i>				
FEEDBACK	YES	MOSTLY	SOME	NO
Was the Student professional in their conduct and approach to completing work experience?				
Information regarding Supervisor requirements was clear and easy to follow.				
Did the Student demonstrate an ability to work with the Reformer level Pilates repertoire relevant to their course?				
Did the Student correctly apply the foundations and concepts and principles of the Pilates Method including neutral positions, breathing, torso stability, progressions and regressions, controversial and contraindicated exercise?				
Does the Student demonstrate an understanding of postural assessment, common faulty postures and appropriate exercise selection and programming?				
Does the Student demonstrate an understanding of special conditions and appropriate exercise selection and programming relevant to their course? (Please note, question not relevant to Students studying Certificate course).				

REFORMER WORK PLACEMENT LOGBOOK

Does the Student demonstrate a professional working manner while in the studio, including professional presentation and behaviour, regular self-mastery (including regular adherence to instructor maintenance protocols)? (Student guidelines are attached for your reference).				
Does the Student adhere to all WHS Policies and Apparatus Safety Protocols?				
Can you give any additional feedback regarding the Student's instructional ability such as use of appropriate cues (visual/verbal/imagery/tactile), teaching position and movement around clients, communication skills (personality, body language, rapport building skills) and ability to monitor appropriateness of program or class plans?				
Do you have any additional feedback and or comments on the questions above or the overall course structure and how you felt the Student progressed and managed requirements whilst under your supervision?				

CHECK POINT

- ⇒ The Supervisor Feedback Form is complete with the Supervisor's name, studio location (workplace), and this form is signed and dated.
- ⇒ The form is complete, and all required boxes are checked.
- ⇒ The form is complete with your full name and Course.

REFORMER WORK PLACEMENT LOGBOOK

PART 3 | REFORMER - TEACHING LOG

#TEACHING HOURS

WORK PLACEMENT TEACHING HOURS ENTRIES																														
UNITS OF STUDY	Instruct the Pilates studio introductory to basic Reformer repertoire																													
	Instruct the Pilates studio progressive Reformer repertoire																													
	Instruct the Pilates studio intermediate Reformer repertoire																													
ENTRY	1	2	3	4	5	6	7	8	9	10	12	13	14	15	16	17	18	19	20	21	22	22	23	24	25	26	27	28	29	30
Date completed this Teaching Entry:																														
How did you perform the activity? <i>Face to Face (F2F), Co Instruction (CI), Teaching Clinic (TC)</i>																														
How many people did you teach to or assist with?																														
How long did you teach? (hrs) <i>Note: you can log multiple hours in the one column (e.g. today I did 3 hours teaching practise)</i>																														
INSTRUCTIONS: The performance criteria activities 1 – 54 below only require a <u>minimum of two instances</u> to be performed and ticked across the duration of your total your teaching hours.																														
0	Example performance criteria	✓										✓																		
1	Prepared for the class including a risk assessment of the studio space including the equipment.																													

REFORMER WORK PLACEMENT LOGBOOK

[illegible]

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[illegible]

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[illegible]

REFORMER WORK PLACEMENT LOGBOOK

REFORMER: INTERMEDIATE																															
38	Programmed and Instructed a Group Reformer class with Intermediate level repertoire.																														
39	Appropriately chose repertoire to suitably match the client's level and individual requirements.																														
40	Conducted a client/s pre-screening before the session commenced.																														
41	Used postural assessment techniques to monitor clients' core stability and peripheral mobility of clients and made variations to the program if required.																														
42	Demonstrated application of core teaching concepts and principles (e.g. control, concentration, breathing etc.) and used the correct names for exercises.																														
ENTRY		1	2	3	4	5	6	7	8	9	10	12	13	14	15	16	17	18	19	20	21	22	22	23	24	25	26	27	28	29	30
43	Made sure that each client is familiar with the Reformer equipment and how it can impact according to the program repertoire and use of the equipment.																														
44	Adjusted the repertoire due to information obtained in the pre-screening																														
45	Demonstrated correct breathing patterns																														
46	Demonstrated correct movement mechanics and patterns																														
47	Demonstrated an understanding in exercise application in relation to posture																														
48	Identified and appropriately applied teaching techniques for controversial and contra-indicated movements.																														
49	Appropriately identified and addressed any specific requirements of the clients and adapted using cushions, pads, TheraBand, and other aids to ensure optimal technique.																														

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REFORMER WORK PLACEMENT LOGBOOK

STUDENT DECLARATION

Initials only. I declare that what I have recorded is true and understand that Work Placement hours are in preparation for my Practical Assessment.

SUPERVISOR SIGNATURE

Please initial each entry.

[illegible]

WHO CAN SIGN OFF MY TEACHING HOURS?

- ⇒ A Supervisor.
- ⇒ A "client". **"Client" defined as:** A person to whom you have taught a duration of Pilates to log one or more teaching hours. Clients can be friends, family and or other Students.

CHECK POINT

- ⇒ A minimum of two checks must be applied to each activity, 1-54, across the duration of your teaching hours.
- ⇒ All boxes must be checked every time you complete teaching hours.
- ⇒ Upon submission, review to ensure you have the correct cumulative total required to meet the prescribed teaching hours.
- ⇒ Every entry is signed by you.
- ⇒ Every entry is signed by a Supervisor or Client.

WORK PLACEMENT HOURS: OBSERVATION - REFORMER					
DATE	CLASS TYPE (Ref – Pregnancy; Ref – Beginner; Ref – Progressive etc)	WORK PLACEMENT STUDIO (WPS) / Online (ONL)	TIME SPENT (Hours)	CUMULATIVE TOTAL	SIGNATURE
14/11/24	Ref - Intermediate	ONL	2 hours	2	Sign here
20/11/24	Ref – Progressive	WPS	1.5 hours	3.5	Sign here

REFORMER WORK PLACEMENT LOGBOOK

I, the Student declare that I have carried out each hour as recorded and have totalled the required number of observation hours:		STUDENT SIGNATURE:		DATE:	

WHO CAN SIGN OFF ON MY OBSERVATION HOURS?

- ⇒ A Supervisor.
- ⇒ Yourself (for digital entries only.)

CHECK POINT

- ⇒ Every line of entry is completed in full.
- ⇒ Every entry is signed and dated where indicated.

REFORMER WORK PLACEMENT LOGBOOK
PART 5 | REFORMER – SELF MASTERY LOG

WORK PLACEMENT HOURS: SELF - MASTERY

SELF-MASTERY
One (1) hour of Self-Mastery per week over the duration of your study for this unit of study.

DATE	CLASS TYPE (Ref – Pregnancy; Ref – Beginner; Ref – Progressive etc)	WORK PLACEMENT STUDIO (WPS) / Online (ONL)	TIME SPENT (Hours)	ACCUMULATIVE TOTAL	SIGNATURE
14/11/24	Ref - Intermediate	ONL	1 hours	1	Sign here
20/11/24	Ref – Progressive, Ref - Beginner	WPS	2 hours	3	Sign here

REFORMER WORK PLACEMENT LOGBOOK

I, the Student declare that I have carried out each hour as recorded and have totalled the required number of observation hours:	STUDENT SIGNATURE:		DATE:		

REFORMER WORK PLACEMENT LOGBOOK

WHO CAN SIGN OFF ON MY SELF-MASTERY?

- ⇒ A Supervisor.
- ⇒ You.
- ⇒ The group class or session Instructor.

CHECK POINT

- ⇒ Every line of entry is completed in full.
- ⇒ Every entry is signed and dated where indicated.

REFORMER WORK PLACEMENT LOGBOOK

PART 6 | REPERTOIRE AUDIT LOG

This is a working document designed to guide your progress and then document your own mastery. Conduct an audit of your ability to perform the Repertoire in the tables below. Please note any exercises that you are not yet comfortable with at the end of this section. You are only required to audit repertoire relevant to this unit cluster.

	MID – PATHWAY CHECK IN AUDIT				END OF PATHWAY CHECK IN AUDIT
REFORMER REPERTOIRE	This exercise is clear to me. I am comfortable at executing it.		This exercise is clear to me. I am comfortable teaching it.		I am comfortable in executing and teaching this exercise now.
INTRODUCTORY LEVEL	YES	NO	YES	NO	YES
Leg and Footwork: Doubles					
Raises					
Prances					
Leg and Footwork Singles: Heels					
Leg and Footwork Singles: Toes					
Arms Supine 1-5					
Preparation for the Hundred					
Legs Strapwork Series: Little Frog					
Legs Strapwork Series: Circles					
Legs Strapwork Series: Openings (High/Low)					
Arms Supine Series					
Long Box: Basic Back Extensions					
Pelvic Curl					
The Hundred					
Preparation for the Short Spine					

REFORMER WORK PLACEMENT LOGBOOK

Knee Stretch Series: Scooter					
Knee Stretch Series: Round and Flat					
Elephant					
Shoulder Press					
Side Reach					
Long Box: Pulling Straps 1					
Long Box: Pulling Straps 2					
Pelvic Curl with Extension					
Basic Lunge					
PROGRESSIVE LEVEL	YES	NO	YES	NO	YES
Leg and Footwork Singles: Heels Progression					
Leg and Footwork Singles: Toes Progression					
Coordination					
Short Spine					
Short Box: Genie					
Short Box: Flat Back					
Short Box: Tilt					
Short Box: Twist					
Knee Stretch Series: Reverse					
Upstretch 1					
Upstretch 2					
Downstretch					
Chest Expansion					

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Page 19 of 21

Document
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or administration@pilatesitc.edu.au or contact +61 89330 4570.

REFORMER WORK PLACEMENT LOGBOOK

Skating Prep					
Long Box: Flat Back					
Kneeling Lunge					
INTERMEDIATE LEVEL	YES	NO	YES	NO	YES
Leg and Footwork: Liza					
Leg and Footwork: Développé					
Butterfly					
Legs Strapwork Series: Extended Frog					
Long Spine					
Semi-Circle					
Stomach Massage: Curve					
Stomach Massage: Flat Back					
Stomach Massage: Reach					
Longstretch Series: Longstretch					
Hi Bar Cobra					
Short Box: Climb-A-Tree					
Arms Kneeling 1-4					
Standing Abduction					
Standing Adduction					
Skating					
Short Box: Side Overs					
Long Box: Breaststroke					
Long Box: Swan					

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Code/Title 11332NAT Reformer Logbook

Page 20 of 21

Document
Controller

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REFORMER WORK PLACEMENT LOGBOOK

Long Box: Double Leg Stretch					
Long Box: Preparation for Teaser					
Long Box: Teaser					
Long Box: Jockey					
Full Lunge					
Reverse Lunge					

PRE-SUBMISSION: CHECK POINT

- ⇒ At the end of the Pathway, ALL Repertoire must be documented as 'YES': indicating you are comfortable executing and teaching this repertoire.
- ⇒ *Exemption: due to contraindications documented at the point of enrolment, reasonable adjustments or exemptions may have been arranged with the Training Manager. In this instance, please list this for the Assessor's reference.*