



Holy Spirit Coach's Evaluation

The purpose of this evaluation is to assist the Athletic Director and Athletic Committee of the Education Commission in making sure the coaches with whom we entrust our children reflect the philosophy of the sports program at Holy Spirit.

Coach: _____

Grade: (circle) 5 6 7 8 5/6 7/8

Sport: _____

Today's Date: _____

Please be sure your evaluation is for the season/sport just completed. **If appropriate, seek input from your student/athlete.** Return the evaluation to Mark Nawrocki – Athletic Director – via the school office. **Only signed evaluations (by a parent) will be considered.** All evaluations will remain confidential. "A summary will be given to each coach as requested".

Please rate the questions on the following scale:

1 - Excellent, 2 - Good, 3 - Average, 4 - Below Average, 5 - Poor. (If the rating is a 4 or 5, please explain.)

1. *Were practices used to teach and improve player skills?* 1 2 3 4 5
2. *Did the coach communicate well with the players?* 1 2 3 4 5
3. *Did the coach communicate well with you as a parent?* 1 2 3 4 5
4. *Did the coach work well with other coaches on the team?* 1 2 3 4 5
5. *Did the coach handle himself/herself appropriately during games?* 1 2 3 4 5
- 6) *Did the coach handle game situations well?* 1 2 3 4 5
- 7) *Were the players treated equally during the season?* 1 2 3 4 5
- 8) *Were policies (i.e., playing time, practice time) followed?* 1 2 3 4 5
- 9) *Were the overall behaviors of coaches and players during the year appropriate for the level of play?* 1 2 3 4 5
- 10) *Rate the coach's knowledge of the sport coached.* 1 2 3 4 5
- 11) *Was the season fun for your student/athlete?* 1 2 3 4 5

12) *Did the coach hold a preseason meeting of players and parents outlining policies and expectations?*

Yes No

13) *Overall evaluation of the coach:*

1 2 3 4 5

Please list the coach's strengths.

Please list the coach's weaknesses (if any).

General Comments:

Name: _____