

Bremen Parks & Recreation Department

Athlete/Parent Evaluation of Coach



Promoting Healthy & Enriching Lifestyles

Coach's Name: _____ Team: _____

Athlete's Name: _____ Date: _____

Age Division: _____ Sport: _____

*** We would appreciate you providing an honest evaluation of our coach as part of our efforts to provide the best Youth sports programs possible. Thank you! ***

(Please circle only one response per question using the following rating system & return to Office/Staff)

A. General observations of the coach	Not at All		Somewhat		Very Much
Knowledge of the game	1	2	3	4	5
Knowledge of the rules	1	2	3	4	5
On time for practices	1	2	3	4	5
On time for games	1	2	3	4	5
Appropriate number of practices	1	2	3	4	5

B. To what degree did your child achieve the following?	Not at All		Somewhat		Very Much
Had fun	1	2	3	4	5
Learned how to play better	1	2	3	4	5
Improved physical fitness	1	2	3	4	5
Learned to cooperate with teammates	1	2	3	4	5
Learned to compete appropriately	1	2	3	4	5
Increased motivation to continue playing	1	2	3	4	5
Developed leadership skills	1	2	3	4	5

C. How Did the Coach Do on the following items?	Not at All		Somewhat		Very Much
Treated your child fairly	1	2	3	4	5
Played your child the required amount	1	2	3	4	5
Took appropriate safety precautions	1	2	3	4	5
Organized practices and games	1	2	3	4	5
Communicated with you	1	2	3	4	5
Listened to you	1	2	3	4	5
Taught the skills needed	1	2	3	4	5
Showed self-control	1	2	3	4	5
Encouraged and recognized you	1	2	3	4	5
Helped you feel good about yourself	1	2	3	4	5
Played everyone a fair amount	1	2	3	4	5

D. Please explain any 1, 2 or 3's circled: _____

E. Would you recommend that your child's coach be encouraged to continue coaching in this program?

(Please circle) Yes No

F. Would you recommend your coach as the All-Star Coach?

(Please circle) Yes No