



**A. J. DIMOND HIGH SCHOOL
COACH'S ASSESSMENT FORM**

(Circle One) PLAYER PARENT

Parent/Students:

We are seeking your input to review our sport/athletic programs. Your opinion is taken into consideration when evaluating our programs and identifying patterns of support or concern. Please take a few moments of your time to fill out this short survey. Your input is anonymous unless you add your name. However, recognize that the form and your written comments will be shared with the person for whom you are providing input. Please try to focus on comments that will reward a person for good performance or make specific suggestions on how performance might improve. Please return this assessment form via U.S. mail or bring it by the Activities Office. Thank you.

SPORT _____ LEVEL (Circle) C JV V

COACH'S NAME _____ DATE: _____

Please rate the coach in each area on a scale from 1-5, with 1 being poor and 5 being excellent. Circle the appropriate number or NA if not applicable, or if you are not able to rate the coach in an area.

	Poor	Fair	Good	Very Good	Excellent	NA
1) Communication w/parents	1	2	3	4	5	NA
2) Communication w/ players	1	2	3	4	5	NA
3) Organizational skills	1	2	3	4	5	NA
4) Motivation of players/team	1	2	3	4	5	NA
5) Discipline of team/players	1	2	3	4	5	NA
6) Knowledge of the sport	1	2	3	4	5	NA
7) Game strategy	1	2	3	4	5	NA
8) Prevention and care of injuries	1	2	3	4	5	NA
9) Attitude/Conduct during game	1	2	3	4	5	NA
10) Attitude/Conduct of players	1	2	3	4	5	NA
11) Ability to teach skills	1	2	3	4	5	NA
12) Overall rating of coach	1	2	3	4	5	NA

Please add any comments below or on a separate sheet of paper.

Name (optional) _____