

Woodford Co. Middle School
HEAD Athletic Coach parent Evaluation Form
(Revised 6/2003)

Parent/guardian: _____

Please help us evaluate how well we did this season by telling us about your player's head coach. The athletic department is committed to the mission statement of our school *"Woodford County Middle School strives to develop academic excellence, positive and healthy self-esteem, and physical well-being in productive, responsible citizens."* With your help in the evaluation process we hope that all sports and coaches will work to improve over time.

Coach: _____

Date: _____

Team: _____

Grade: _____

My player's coach: _____ **Strongly Agree -- Strongly Disagree**

1. Obeyed ALL WCMS rules	1	2	3	4	5	6
2. Showed respect for officials	1	2	3	4	5	6
3. Treated all players with respect	1	2	3	4	5	6
4. Treated opponents with respect	1	2	3	4	5	6
5. Rewarded effort, not just results	1	2	3	4	5	6
6. Helped players learn and improve in the sport	1	2	3	4	5	6
7. Helped players bounce back from mistakes	1	2	3	4	5	6
8. Used positive reinforcement	1	2	3	4	5	6
9. Encouraged players to do their best	1	2	3	4	5	6
10. Made the sport fun for my player	1	2	3	4	5	6
11. Listened to my player	1	2	3	4	5	6
12. Was a positive role model for my player	1	2	3	4	5	6
13. Communicated rules, information changes, etc.	1	2	3	4	5	6
14. Disciplined team and individuals when necessary	1	2	3	4	5	6
15. Would you like your player to have this coach again?	Yes _____			No _____		

Comments: _____

Please return this evaluation form to Whitney Allison, WCMS Athletic Director. Thank you for your continued interest and support.