

Sports Evaluation Form

Grade: _____ Sport: _____ Date: _____

Head Coach: _____

Dear Parents,

Please answer all questions with one of the following responses:

YES, NO, LIKELY or NOT LIKELY

PLEASE see that this Evaluation Form goes to Tony Hudson (AD)

If necessary, mailing address: Tony Hudson 6506 Buisson Ln Lou, Ky. 40219

1.) Did your child enjoy participating in this sport?

2.) Do you feel that your child made progress or improvement this season?

3.) Will your child participate in this sport again?

4.) Were practices constructive, informational and beneficial to you child?

5.) Were the players and the school positively represented at the games and tournaments?

6.) Did your coach effectively inform players and parents regarding practice and game times, including rescheduling and cancellations?

7.) Did your child learn the importance of Teamwork, Sportsmanship and Competition?

8.) Did the coach display a sufficient understanding and knowledge of the sport in which he or she coached?

9.) If you would like to make any additional comments regarding this season, please do so on the back of this form. If you choose to do so, please sign your name on the form. The Booster Club would like to thank you for completing the evaluation and participating in St. Athanasius Athletics.

