



Avalon Celtics Coach Evaluation Form

Please give us your feed back on the coach your son or daughter has had this past season. Please answer all categories as honestly as possible. AMHA will use these forms to help evaluate our coaches and provide feedback as required.

It is not required to give your name, however, if you wish to be contacted please give us your information below the form. Any further comment you wish to make can be added and are also appreciated as well! All completed forms can be e-mailed to info@avalonceltics.com or sent by fax to 722-3499.

2007/08 TEAM: _____

Please CIRCLE the following:

(0) Unacceptable, (1) Poor, (2) Needs Improvement, (3) Average, (4) Good, (5) Excellent

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|----------------------------------------------------|-------------|---------------------------------------------------|-------------|
| On time for games | 0 1 2 3 4 5 | On time for practices | 0 1 2 3 4 5 |
| Treats all players fairly | 0 1 2 3 4 5 | Applies team rules fairly | 0 1 2 3 4 5 |
| Has positive attitude with players | 0 1 2 3 4 5 | Has positive attitude with parents | 0 1 2 3 4 5 |
| Displays and promotes Sportsmanship with Team | 0 1 2 3 4 5 | Displays and promotes Sportsmanship with Parents | 0 1 2 3 4 5 |
| Displays and promotes Sportsmanship with Officials | 0 1 2 3 4 5 | Teaches and/or demonstrates Knowledge of the game | 0 1 2 3 4 5 |
| Teaches and/or demonstrates Rules of the game | 0 1 2 3 4 5 | Teaches and/or demonstrates Skill development | 0 1 2 3 4 5 |
| Teaches and/or demonstrates Positive reinforcement | 0 1 2 3 4 5 | Organizes practices well | 0 1 2 3 4 5 |
| Game Preparation for team | 0 1 2 3 4 5 | Promotes Team Play | 0 1 2 3 4 5 |
| Communicates well with players | 0 1 2 3 4 5 | Communicates well with Parents | 0 1 2 3 4 5 |
| Player enjoyed being on this team | 0 1 2 3 4 5 | | |

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| **You would want this coach again for next season** | 0 1 2 3 4 5 |
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ADDITIONAL COMMENTS