

2009-10 VHS Coaching Feedback (Athletes)

Sport/Activity: \_\_\_\_\_ Coach: \_\_\_\_\_

Name (optional): \_\_\_\_\_ e-mail (optional): \_\_\_\_\_

Thank you for taking the time to complete this survey. We appreciate your constructive feedback—please provide specific details. Your responses will be shared with the appropriate coaching staff. This feedback is not part of the coach's formal evaluation, but serves as a valuable opportunity for discussion and growth as needed. It is my hope that if you had specific issues come up during the season, that you already addressed these issues/concerns with the coach, but please feel free to make a note of them here as well.

1=strongly disagree      2=disagree      3=agree      4=strongly agree

**1. The coach communicated well with athletes/participants regarding team rules and expectations.**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

**2. The coach's approach to the athletes/participants was appropriate.**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

**3. The coach displayed knowledge of the sport/activity.**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

**4. The coach was responsive to questions or concerns brought to his or her attention.**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

**5. The coach fostered a positive attitude in the athletes/participants towards the entire team (C/JV/Varsity).**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

**6. The coach fostered a positive attitude in the athletes/participants towards the game/activity.**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

**7. The coach taught me appropriate skills or techniques.**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

**8. My skill, technique and knowledge of the activity improved during the season.**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

**9. I enjoyed playing for the coach this season.**

1      2      3      4      no opinion

Comments: \_\_\_\_\_

Please complete both sides of this survey.

**10. The coach set a positive example regarding:**

Professionalism	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Sportsmanship	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Rules of the game	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Referees/Judges	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Teammates	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Opponents	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Parents	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion

Comments: \_\_\_\_\_

**11. The coach treated the athletes/participants fairly with regard to:**

Playing time	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Developing technique or skill	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Promoting participants' self esteem	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion

Comments: \_\_\_\_\_

**12. The coach:**

Projected a positive image	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Used appropriate language	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Maintained control and discipline	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Arrived on time and attended all practices	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Attended all games (C/JV/Varsity)	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Traveled with the team to/from contests	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion

Comments: \_\_\_\_\_

**13. Training sessions/practices were:**

Well prepared	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Well organized	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Run efficiently	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion
Focused on specific team needs	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> no opinion

Comments: \_\_\_\_\_

**14. I attained my personal goals this season:**      1    2    3    4    no opinion

**15. We attained our team goals this season:**      1    2    3    4    no opinion

**16. Our team goals were:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Additional feedback (attach additional sheets as needed):**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please return your completed survey to Dr. Spencer in the main office. Thank you.  
 Fall feedback due by Friday, December 4, 2009  
 Winter feedback due by Friday, March 26, 2010  
 Spring feedback due by Friday, June 4, 2010