

Eureka County High School Coaching/Advisor Evaluation Form

Date:

Coach/Advisor Name:

Coach/Advisor Email:

Sport/Activity:

Position:

Instructions: Rate your personal abilities for each item on a scale of 1-5. Note: if you are filling out this self-evaluation as an extra-duty **advisor**, substitute the words “coach” and players with the words “advisor” and “students”.

5 = Superior 4 = Very Good 3 = Good 2 = Average 1 = Poor N/A = Not Applicable

Administrative Duties:

1. _____ consistently communicated with the athletic office regarding paperwork, rosters, eligibility, etc.
2. _____ effectively communicated with coaches in regards to roles, duties, and expectations
3. _____ supervised practice area and locker room when athletes were present
4. _____ accurately prepared an inventory of team equipment and uniforms
5. _____ consistently ensured that all facilities and equipment were secure following use
6. _____ adequately supervised travel and overnight trips

Relationships:

7. _____ demonstrated high ethical standards and behaviors all times
8. _____ displayed exemplary behavior and is a positive role model

9. _____ effectively communicated with athletes, parents, and administration
10. _____ respectfully interacted and communicated with officials and the other team's coaches and players
11. _____ consistently demonstrated professionalism and sportsmanship

Coaching Performance:

12. _____ adequate preparation in team strategies and capabilities
13. _____ successfully used praise and constructive criticism with the team and its individual players
14. _____ practices were effectively planned and conducted to reflect optimum time management and player engagement
15. _____ consistently demonstrated the ability to make game plans and appropriate in-game adjustments
16. _____ consistently strives to improve knowledge of game strategies and individual and team skills
17. _____ consistently ensured that individual players are appropriately conditioned and prepared to play
18. _____ maintained effective individual and team discipline at practice and games
19. _____ continual emphasis placed on teaching team and individual offensive basic skills and fundamentals
20. _____ continual emphasis placed on teaching team and individual defensive basic skills and fundamentals
21. _____ player and parent complaints handled satisfactory
22. _____ is off season effort and participation adequate
23. In what coaching areas do you feel you are particularly strong?

24. In what coaching areas do you feel improvement is needed?

Coach/Advisor Comments:

Activities Director / Principal Comments:

Evaluator(s) Signature: _____

Date: _____

Date: _____

Coach/Advisor Signature: _____

Date: _____

****Coaches**: Please bring completed form to your scheduled post-season evaluation.