

SOUTHLAND HOCKEY – Coach Evaluation 2009- 2010 Season

Division: _____ **Southland team #:** _____

Head coach: _____ **Date completed:** _____

Parent & Player name (mandatory to make this form valid): _____

Parent signature (mandatory to make this form valid): _____

The purpose of this questionnaire is to collect feedback on the coaching your child has received this season from the **head coach**. Your input and feedback (positive and constructive) is very important to the Southland Hockey coach development and Coach Mentor process. Your comments help to provide feedback to the coaches, the Hockey Development Coordinator (aids in future coach selections) and Coach Mentors. Please be fair and provide constructive criticism where possible.

Place completed forms in a sealed envelope addressed to “Southland Hockey – Hockey Development Coordinator” and return to your team Manager or mail it to Southland Hockey , 1600 90th Avenue S.W., PO Box 72114, RPO Glenmore Landing, Calgary T2J 7A6

Thank you in advance for your valuable time.

Circle one. Scale: 5 – always; 4 – most of the time; 3 – sometimes; 2 – rarely; 1 - never

1. The coach stressed that the kids abide by the “fair play code”?	5 4 3 2 1
2. The coach held players accountable for inappropriate actions & maintained an acceptable level of discipline?	5 4 3 2 1
3. The coach communicated effectively and was approachable to the players.	5 4 3 2 1
4. The coach was able to motivate, provide encouragement and consistent feedback both positive and constructive.	5 4 3 2 1
5. The coach maintained acceptable composure on and off the ice.	5 4 3 2 1
6. The coach addressed the players before and after every game.	5 4 3 2 1
7. The coach was prepared with a practice plan?	5 4 3 2 1
8. Practice time was used effectively?	5 4 3 2 1

Circle “Yes” or “No”. For clarity, please provide additional commentary and give examples where appropriate to support your answer.

1. Did the coach hold a parent meeting at the beginning of the season? Yes No

Comments: _____

2. Was the level of coaching appropriate for this level? Yes No

Comments: _____

3. Was this a fun and positive year for your child? Yes No

Comments: _____

4. Would you recommend this coach for another position next year? Yes No

Comments: _____

Please complete if you've witnessed at least half of the practices during the season.

Based on your observations and perspective, approximately what percentage of the practice time was spent on the following:	%
<ul style="list-style-type: none"> • Skill Development (teaching proper techniques; skating, puck handling & passing drills) • Scrimmages • Checking skills • Team tactics (power play / penalty killing strategies, etc) • Other (please list) 	_____
	100

Was the practice time properly utilized for this level, if not please explain? _____

General comments: _____

