

BPMHA Coaching Staff Evaluation Form

Team: _____

Coaches Name: _____

Your Name (optional): _____

Please tell us to the extent to which you agree or disagree with each of the following statements about the coach of your hockey team.

Circle the most appropriate number, using a following scale:

Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1	2	3	4	5

Please circle 'n/a' (not applicable) if you cannot or do not wish to answer a particular item.

Practices

Is the coach running well-organized practices?	1	2	3	4	5	n/a
Are your hockey skills improving?	1	2	3	4	5	n/a
Are you receiving positive direction and feedback?	1	2	3	4	5	n/a

Games

Are all players on the team receiving a fair amount of ice time over the course of the season?	1	2	3	4	5	n/a
Are discipline issues being handled fairly and consistently?	1	2	3	4	5	n/a
Is the coach keeping winning in perspective?	1	2	3	4	5	n/a
Is the coach's conduct at games/practices acceptable?	1	2	3	4	5	n/a

General

Are you having a positive learning experience so far this season?	1	2	3	4	5	n/a
Are you having fun so far this season?	1	2	3	4	5	n/a
Is the coach helping to develop your confidence, self-respect and respect for your teammates?	1	2	3	4	5	n/a
Are you learning sportsmanlike behavior?	1	2	3	4	5	n/a
Is the coach an effective teacher?	1	2	3	4	5	n/a
Is the coach communicating effectively with you and all players?	1	2	3	4	5	n/a
Is the coach communicating effectively with the parents?	1	2	3	4	5	n/a
Is the coach treating all players fairly?	1	2	3	4	5	n/a
Is the team progressing over the course of the season?	1	2	3	4	5	n/a

Overall

So far this season has your hockey season been an enjoyable experience?	Y	N
Would you want this individual to coach you again?	Y	N
Are you planning on coming back to our association next year if eligible?	Y	N

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Additional comments/suggestions for the coach:

Lined area for writing comments regarding the coach.

Additional comments/suggestions for the assistant coaches/trainer/manager/parent rep:

Lined area for writing comments regarding assistant coaches, trainers, managers, or parent representatives.

This is a confidential survey, only the coaching committee will have access to this information. Only positive feedback and constructive criticism from your feedback will be given to the coaches. Please return survey in a sealed envelop to your Parent Representative.