



## Postseason Parent Evaluation Form

Please answer the following questions honestly, expressing your true feelings about each topic. This evaluation is important to the success of our program, so we need feedback that accurately reflects the job we are doing in each phase of the program.

**Please circle one:**

<b>My child had fun.</b>	<b>very much · somewhat · not at all</b>
<b>My child learned the fundamentals of the sport.</b>	<b>very much · somewhat · not at all</b>
<b>What grade is your child in?</b>	<b>5<sup>th</sup> · 6<sup>th</sup> · 7<sup>th</sup> · 8<sup>th</sup></b>
<b>What gender is your child?</b>	<b>Boy · Girl</b>

Improved                      No change                      decreased                      Don't know

**1. Please evaluate the following (please check one)**

<b>Physical fitness</b>				
<b>Learning to cooperate</b>				
<b>Self-confidence</b>				
<b>Desire to continue to play this sport</b>				
<b>Learning specific skills of this sport</b>				
<b>Leadership skills</b>				
<b>Sportsmanship</b>				
<b>Development of initiative</b>				
<b>Learning to compete</b>				

Excellent                      Good                      Weak                      Poor                      Don't know

**2. How did the coach do on the following (please check one)**

<b>Treated your child fairly</b>					
<b>Kept winning in perspective</b>					
<b>Took safety precautions</b>					
<b>Organized practice and contests</b>					
<b>Communicated with you</b>					
<b>Was effective in teaching skills</b>					
<b>Encouraged your child</b>					
<b>Held your child's respect</b>					

**NO                      YES**

**3. Additional Info (please check one)**

<b>Was there adequate information to you about the program?</b>		
<b>Will your student-athlete return next year?</b>		
<b>Did you volunteer during our home games?</b>		