



COACH'S EVALUATION

NAME: _____ (Name Required)

You are evaluating the Head Coach of the team. Please write any additional comments about the Head Coach or the other Bench Staff in the comment section. Please circle one number only.

Player Questions:

	Poor					Excellent				
1. Was the coach fun and positive?	1	2	3	4	5					
2. Were the practices well run and organized?	1	2	3	4	5					

Parents and Player Questions:

1. Was this a positive/fair ringette experience?	1	2	3	4	5					
2. Did individual skill levels improve?	1	2	3	4	5					
3. Did team skills improve?	1	2	3	4	5					
4. How would you rate the coaches conduct on and off the ice?						1	2	3	4	5
5. Would you recommend this coach for next year?	Yes					No				

Comments:

Team: _____ Coach: _____

Please submit to St. Marys Ringette at the banquet or mail to:

St. Marys Ringette Association,
Box 2949, St. Marys ON N4X 1A6

Be fair and honest as possible. Thank you for your time.