ASSISTANT COACH EVALUATION FORM

Coach Name ___________________________

The assistant coach's evaluation will be based on how well he scores on each of the responsibilities listed below. Scoring on each item will reflect: 3 – Effective 2 - Needs Improvement 1 – Ineffective

Professional Duties and Responsibilities
___ performs all duties assigned by the head coach
___ abides by all relevant College policies and administrative guidelines
___ prepares his weight class wrestlers for assigned practice sessions with specific training objectives
___ enforces all team rules and regulations
___ reports injuries promptly and exercises great care in dealing with all injuries

Coaching Performance
___ develops respect by example in appearance, manners, behavior, language, & conduct
___ maintains suitable sideline control and discipline
___ provides proper supervision in all situations
___ maintains effective individual and team discipline and control
___ is fair, understanding, tolerant, empathetic, and patient with wrestlers
___ is innovative in trying and assessing new coaching techniques and ideas
___ shows an interest in athlete's academic achievements and on-season/off-season activities
___ models behaviors which reflect the values of good sportsmanship, fair competition, & ethical behavior

Professional and Personal Relationships
___ develops rapport, respect, and buy into program with other members of alumni, other teachers, and administrators
___ conducts and/or participates in necessary inservice meetings and coaches clinics to improve coaching performance and attends meetings necessary to the welfare of the team and program
___ positive Attitude in Practice, Competition, Staff Meetings, Team Meetings, and all aspects of position

IV. Evaluators Comments

V. Comments by the Assistant Coach

The assistant coach's signature indicates only that all phases of the appraisal have been conducted with the full knowledge of the assistant coach.

(Circle One)

SUCCESSFUL

NEEDS IMPROVEMENT

UNSATISFACTORY

Recommended for continued assignment. Recommended for reassignment provided an understanding can be reached in areas where improvement is suggested. Not recommended for continued assignment.

__________________________________________  ____________________________
Assistant Coach's Signature                  Date

__________________________________________  ____________________________
Head Coach's Signature                      Date