

Date: _____

CENTENNIAL LAKES LITTLE LEAGUE COACHING EVALUATION

The Board of Directors is asking for your assistance in promoting an environment that encourages sportsmanship, competition, and fun while acquiring some knowledge of the game of baseball/softball. This form is the first step in that process. Please take a moment to complete the form. This is your opportunity to have an input in the direction of this League. Thank you.

Team Name: _____ Age & Level of Play: _____

Head Coach Name: _____ Asst. Coach #1: _____

Asst. Coach #2: _____ Asst. Coach #3: _____

Please rate each coach on the following characteristics, taking into account the level of play. Place a number for each statement based on the following: 4=Excellent, 3=Good, 2=Adequate, 1=Poor

Characteristic	Coach	#1	#2	#3
Displays knowledge of rules and skills				
Displays knowledge of strategy and team play				
Displays the ability to teach and communicate				
Displays ability to analyze game situations				
Creates enthusiasm and proper attitude				
Has realistic expectations of athletes				
Well organized				
Communicates effectively				
Also, have your athlete evaluate each coach				

Has your athlete's skill level improved this year? _____ Yes _____ No

Has the teams' play improved this year? _____ Yes _____ No

Please explain: _____ (continue on back)

Additional comments (including tryout format, facilities, etc.): _____

_____ (continue on back)

Your name (optional): _____ May we contact you? If so, phone #: _____

Please mail to: Centennial Lakes Little League, Coaching Committee,
4175 Lovell Road, #330, Lexington, MN 55014 Fax 763-792-3780