

MILLARD PUBLIC SCHOOLS – ASSISTANT COACH EVALUATION

Post-Season Evaluation – Completed by Head Coach

Name:

Evaluator:

Assignment:

School:

School Year:

0: Not Observed 1: Not Meeting Expectations 2: Needs Improvement
3: Meeting Expectations 4: Exceeding Expectations

Player Development –

Assists or plans in-season practice sessions.

0 1 2 3 4

Is engaged in students' academic progress and development of life skills.

0 1 2 3 4

Evaluator Comments (optional):

Professional/Personal Development –

Communicates appropriately to all stakeholders.

0 1 2 3 4

Pursues professional development that will keep the program successful.

0 1 2 3 4

Models appropriate and respectful behaviors and maintains high expectations for athletes' behavior.

0 1 2 3 4

Evaluator Comments (optional):

Program Development –

Perform duties as assigned by the head coach.

0 1 2 3 4

Involvement in off-season conditioning sessions.

0 1 2 3 4

Prepare for practices and games by planning, scouting, and game analysis as per sport demand.

0 1 2 3 4

0 1 2 3 4 

Promptly attend all coaching staff meetings and tryouts, practices, team meetings, and athletic contests when team is involved.	0	1	2	3	4
Assist in the development of programs or clinics so that the program is reaching out to future and current athletes in the community.	0	1	2	3	4

Evaluator Comments (optional):

Administrative Duties –

Adheres to the NSAA, district, and school athletic policies and procedures.	Yes	No
Maintains an accurate squad roster at all times.	Yes	No
Provides appropriate supervision of athletes at all times.	Yes	No
Assist in equipment distribution and care.	Yes	No
Appropriate supervision of site and spectators when a site administrator is not present.	Yes	No
Monitors health and safety of the players.	Yes	No
Keeps current with all required certifications.	Yes	No
Ensure a safe environment for games and practices.	Yes	No
Report injuries of participants to athletic trainer and provides appropriate follow-up.	Yes	No
Supports and contributes to the success of the entire athletic program.	Yes	No
Submit to the activities office all required forms.	Yes	No

Post Season Reflection – Completed by Head Coach

Head Coach: Check One

Successful:	To be recommended for continued assignment
Needs Improvement:	To be recommended for reassignment, provided an understanding can be reached in areas where improvement is suggested.
Unsatisfactory:	Not recommended for continued assignment.

These signatures indicate that all parties have read the appraisal; they do not necessarily indicate agreement.

Comments:

Head Coach's Signature

Date

Comments:

Assistant Coach's Signature

Date

Comments:

Activities Director's Signature

Date

ACTIVITIES DIRECTOR: CHECK ONE

- Agrees with assessment by head coach

- Disagrees with assessment by head coach

ORIGINAL-COACH COPY-DIRECTOR OF ACTIVITIES COPY-ACTIVITIES DIRECTOR COPY- HUMAN ESOURCES