



Traverse Bay Area Youth Soccer

TBAYS COACHING EVALUATION FORM

Coach: _____ Age group: _____ Boys/Girls _____

Please rate your coach in each of the categories using the following scale:
 4= strongly agree, 3= Agree, 2= Disagree, 1= Strongly Disagree.

Demonstrates enthusiasm to all players	4	3	2	1
Builds self esteem amongst players	4	3	2	1
Encourages good sportsmanship on and off the field	4	3	2	1
Conducts effective and fun practices	4	3	2	1
Challenges the players ability in practices	4	3	2	1
Has good knowledge of soccer	4	3	2	1
Has a good ability to teach soccer	4	3	2	1
Focuses on individual player development	4	3	2	1
Is reliable and well organized	4	3	2	1
Focuses heavily on winning games	4	3	2	1
Remains positive and gracious whatever the result	4	3	2	1
Has good player motivation/team building skills	4	3	2	1
Treats the referees and officials with respect	4	3	2	1
Shouts and yells during the games	4	3	2	1
Communicates well with parents	4	3	2	1
Is a good role model for my child as a soccer player	4	3	2	1

COMMENTS: (comments are extremely valuable to us, both positive and negative—feel free to use the back of this page for more space).