



St. Michael Boosters'- Sport Evaluation Form

In keeping with the Boosters policies and procedures we are asking for you and your child's input to constantly improve on the Sport programs at St. Michael's. Please take a few minutes and fill out the following evaluation.

PLEASE RETURN TO: St. Michael Boosters - thru School mail – Attn: "M/F Sport Name" Eval's

Grade Level _____ Sport -M / F _____ Coach(1) _____

Athlete Name (OPTIONAL) _____ Coach(2) _____

1. _____ Did your child have fun playing this sport? (*write one letter (A – D) on the line at left of question*)
a) Had a lot of Fun b) Had some Fun c) Had no Fun at all d) Hated the program
2. _____ Did your child learn the rules and a better understanding of the fundamentals of the sport?
a) Yes learned a lot b) Some understanding c) Did not learn much d) Totally confused
3. _____ Has the meaning and spirit of Teamwork been instilled by the coaches of this sport?
a) Yes Great Teamwork b) Average teamwork c) Very Little teamwork
d) No -Shown that the Individual is more important than the team .
4. _____ Did your child feel that he/she was treated fairly?
a) Very Fair b) Somewhat Fair c) Not Fair at All d) Neglected by coach(s)
5. _____ Has your child gained self-confidence as a result of playing this sport on this team?
a) Yes a great amount b) A little confidence c) Same as before d) Lost Confidence
6. _____ Did the coach(s) display and convey mostly positive attitudes and Catholic values?
a) YES b) Sometimes c) NO d) _____
7. _____ Were game playing times distributed fairly among the teammates? (above CYO requirements)
a) YES b) Sometimes c) NO d) _____
8. _____ Were the practices organized and a constructive use of time?
a) YES b) Sometimes c) NO d) _____
9. _____ As a parent, did you show respect for the coach & team by contributing positive feedback and support; while not talking badly about the coaches or other players on the team? A) YES B) NO
10. _____ . In your opinion, would you consider this(these) coach(s) qualified to return next season?
a) Yes Great Job b) Acceptable c) Need some work d) No _____
11. _____ Please rate the overall experience of you and your child in playing on this team.
a) Great b) Good c) O.K. d) Poor _____

Comments / How can we all improve? _____

