

North Kitsap School District

**ASSISTANT COACH EVALUATION**

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

SCHOOL: \_\_\_\_\_

SPORT: \_\_\_\_\_

This form is designed to assist in formulating and recording an accurate appraisal of the individual's effort toward fulfilling the requirements related to his/her coaching assignment. The evaluation should be based on the following rating system:

- |          |              |             |                   |             |                |
|----------|--------------|-------------|-------------------|-------------|----------------|
| <b>S</b> | Satisfactory | <b>N.I.</b> | Needs Improvement | <b>N.A.</b> | Not Applicable |
|          |              | <b>N.O.</b> | Not Observed      | <b>U</b>    | Unsatisfactory |

Professional Relationships:

- \_\_\_\_\_ 1. Complies with school and district policies.
- \_\_\_\_\_ 2. Cooperates with school administration.
- \_\_\_\_\_ 3. Cooperates with Athletic Training staff.
- \_\_\_\_\_ 4. Cooperates with school staff.
- \_\_\_\_\_ 5. Maintains rapport with coaching staff.
- \_\_\_\_\_ 6. Attends professional and inservice meetings and clinics.
- \_\_\_\_\_ 7. Maintains good public relations with news media, parents and community.
- \_\_\_\_\_ 8. Is involved with local, league and state coaches' organization.

Coaching Performance:

- \_\_\_\_\_ 1. Assist head coach in carrying out his responsibilities.
- \_\_\_\_\_ 2. Has good knowledge of the sport and skills involved.
- \_\_\_\_\_ 3. Commits to goals developed by head coach.
- \_\_\_\_\_ 4. Assists head coach with athletic paperwork, equipment issue and inventory.
- \_\_\_\_\_ 5. Maintains good rapport with players.
- \_\_\_\_\_ 6. Develops a professional, supportive relationship with the head coach.
- \_\_\_\_\_ 7. Contributes to establishment of program goals and objectives.
- \_\_\_\_\_ 8. Accepts and completes assigned tasks at direction of head coach.
- \_\_\_\_\_ 9. Displays good sportsmanship and mature behavior.

Recommended for rehire next year       Not recommended for rehire next year  
 (Subject to Athletic Program Needs – Article IV, Section 2 – 2.1, NKAAA Contract)

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Head Coach: \_\_\_\_\_

Date: \_\_\_\_\_

Assistant Coach: \_\_\_\_\_

Date: \_\_\_\_\_

Athletic Director \_\_\_\_\_

Date: \_\_\_\_\_

Principal: \_\_\_\_\_

Date: \_\_\_\_\_