



TIFFIN City Schools

TIFFIN COLUMBIAN ATHLETIC DEPARTMENT
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Assistant Coach Evaluation Form

Sport: _____

Head Coach: _____

Asst. Coach _____

Position: _____

Rating Scale:

- 1- Unsatisfactory
- 2- Needs Improvement
- 3- Effective

Areas:

- 1- Loyalty to Head Coach and Program _____
- 2- Care of equipment _____
- 3- Knowledge of sport _____
- 4- Teaching ability _____
- 5- Ability to motivate _____
- 6- Rapport between coach and players _____
- 7- Supervision of players in locker room and other areas _____
- 8- Rapport between coach and rest of coaching staff _____
- 9- Accepts duties given by head coach _____

Areas of Strength:

- 1.
- 2.
- 3.

Areas of Improvement:

- 1.
- 2.
- 3.

Comments:

The coach's signature indicates only that all phases of the evaluation have been conducted with the full knowledge of the coach.

Head Coach Signature _____

Date _____

Assistant Coach Signature _____

Date _____

Athletic Director Signature _____

Date _____

Circle One:

- Successful
- Needs Improvement
- Unsatisfactory

- To be recommended for continued assignment
- To be recommended for continued assignment, Understanding of areas where improvement is needed
- Not to be recommended for continued assignment