MILLARD PUBLIC SCHOOLS

COACHING ASSESSMENT PRE-SEASON FORM

(To be completed and approved prior to first practice)

Head Coach’s Name and Sport School Year

1. How are you and your coaching staff working with players, teachers, counselors, etc., to improve the academic progress of your players?
2. How are you and your coaching staff monitoring the classroom behavior, class attendance, and academic performance of all participants in your program?
3. Do you have a description of your training rules, team rules and expectations, and lettering/award policies?

[ ] - Yes [ ]  No. Did you provide a copy of your training rules, team rules and expectations, and lettering/awards policies to the Assistant Principal of Activities? [ ] - Yes [ ]  No. If yes, when did provide these items?

1. Did you make any revisions of your training rules, team rules and expectations, and/or lettering/award policies from last season to this season? [ ] - Yes [ ]  No. Did you provide a copy of your revisions to the Assistant Principal of Activities? [ ] - Yes [ ]  No. If yes, when did provide these items?
2. Do you plan to send provide a written copy of your training rules, team rules and expectations, and lettering/awards policies to your players and their parents? [ ] - Yes [ ]  No. If yes, when and how do you provide this information?
3. What is your plan to supervise participants in practice areas, locker rooms, and during away trips?
4. Do you have an emergency plan in place that your coaches and players know and understand? [ ] - Yes [ ] - No. Please note that your emergency plan must be submitted to and approved by the Assistant Principal of Activities prior to your first practice. When did you submit the emergency plan to the Assistant Principal of Activities?
5. What information have you given to the participants that will help them in abstaining from the use of tobacco, illegal drugs, non-prescribed use of steroids, and alcohol while on campus, during the season and school year, and at any time when representing the school and team?

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1. What actions have been implemented by your program to prevent the hazing and harassment of the participants in your program, and what information have you provided to your participants to prevent the hazing and harassment of students in your program?
2. As the leader of your program, how do you plan to work with your assistant and volunteer coaches to develop and improve their coaching skills?
3. What plans do have to continue your professional development as a coach this year?
4. What professional development did you undertake in the last year to develop and improve your coaching skills?
5. Communication and contact with your feeder schools is important; what plans do you have in mind in working with your feeder schools to help build their programs?
6. Will you be encouraging parent participation in your program during the season? [ ] - Yes [ ]  No. If yes, how will your encourage this participation?
7. As the head coach you are responsible for evaluating your assistant and volunteer coaches. What methods will you use to evaluate your assistant and volunteer coaches?
8. Are you familiar with all of the NSAA by-laws as well as district rules and regulations regarding in-season activities, out-of-season activities, summer activities, and recruiting/undue influence policies? [ ] - Yes [ ]  No. Which of these items do you need to review with the Assistant Principal of Activities?
9. To accomplish the goals that you have for the program this year, what help do you believe is needed from the school and/or district?

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Signature of Head Coach Date Given to the Activities Director

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Signature of Activities Director Date Accepted by the Activities Director

ONCE APPROVED BY THE ACTIVITIES DIRECTOR, A COPY OF THIS FORM SIGNED BY THE ACTIVITIES DIRECTOR WILL BE SENT TO THE HEAD COACH. THE ACTIVITIES DIRECTOR WILL RETAIN A COPY OF THIS FORM.

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