

Coach Self Evaluation | Practical Coaching

To be completed by the coach following each practical coaching session to assist with evaluation and review

Coach Details

Coach Name:

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|--|--|

First Name

Last Name

Mentor Coach Details

Mentor Coach 1 Name:

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|--|--|
| | |
|--|--|

First Name

Last Name

Mentor Coach 2 Name:

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|--|--|
| | |
|--|--|

First Name

Last Name

Mentor Coach 3 Name:

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|--|--|
| | |
|--|--|

First Name

Last Name

Self-Evaluation | Practical Coaching Session 1

| | | | | | |
|---------------|--|-----------------|--|----------------|--|
| Coach: | | Session: | | Mentor: | |
| Date: | | Venue: | | Time: | |

| Session Delivery | |
|-------------------------|--|
| Safety | How safe was the session? |
| | |
| Preparation | How did your [the coach's] preparation effect the quality of the session? |
| | |
| Goals/Objectives | Did the athletes meet the goals/objectives of the session, were the goals/objectives appropriate for the athletes? |
| | |
| | What feedback did you [the coach] receive from athletes? |
| Content | Were the activities within the session appropriate, were any changes made during the session? Why? |
| | |

| My Coaching Practice | |
|----------------------|---------------------------------------|
| Coaching | What did I do well? |
| | |
| Coaching | What could I improve? |
| | |
| Development | How do I plan to improve my coaching? |
| | |

Self-Evaluation | Practical Coaching Session 2

| | | | | | |
|---------------|--|-----------------|--|----------------|--|
| Coach: | | Session: | | Mentor: | |
| Date: | | Venue: | | Time: | |

| Session Delivery | |
|-------------------------|--|
| Safety | How safe was the session? |
| | |
| Preparation | How did your [the coach's] preparation effect the quality of the session? |
| | |
| Goals/Objectives | Did the athletes meet the goals/objectives of the session, were the goals/objectives appropriate for the athletes? |
| | |
| | What feedback did you [the coach] receive from athletes? |
| Content | Were the activities within the session appropriate, were any changes made during the session? Why? |
| | |

| My Coaching Practice | |
|----------------------|---------------------------------------|
| Coaching | What did I do well? |
| | |
| Coaching | What could I improve? |
| | |
| Development | How do I plan to improve my coaching? |
| | |

Self-Evaluation | Practical Coaching Session 3

| | | | | | |
|---------------|--|-----------------|--|----------------|--|
| Coach: | | Session: | | Mentor: | |
| Date: | | Venue: | | Time: | |

| Session Delivery | |
|-------------------------|--|
| Safety | How safe was the session? |
| | |
| Preparation | How did your [the coach's] preparation effect the quality of the session? |
| | |
| Goals/Objectives | Did the athletes meet the goals/objectives of the session, were the goals/objectives appropriate for the athletes? |
| | |
| | What feedback did you [the coach] receive from athletes? |
| Content | Were the activities within the session appropriate, were any changes made during the session? Why? |
| | |

| My Coaching Practice | |
|----------------------|---------------------------------------|
| Coaching | What did I do well? |
| | |
| | What could I improve? |
| Development | How do I plan to improve my coaching? |
| | |