

# Collingwood Minor Hockey Association

## Coaching / Staff Evaluations 2017 / 18



Dear Parents;

On behalf of the Board we want to thank you for participating with Collingwood Minor Hockey this season and making it a success. We continuously endeavour to make our Association better, and to do this we need feedback from 'you' our members.

All information that you provide to the Board will be held in strict confidence and will not be shared with the coaching staff. This information will be used to help the Board prepare for the season ahead and plan for the seasons coaching staff. Most importantly make it a better experience for you and your child.

### Section One – Team and Coach

---

1 State your team name:

2 Head Coach's Name:

### Section Two – Player Section

---

*Please note - 1 = lowest rating, 5 = the highest rating*

To be answered by the Player:

1. Did you enjoy being on the hockey team?

q1 q2 q3 q4 q5

2. Did you learn more about hockey?

q1 q2 q3 q4 q5

3. Did your hockey skills improve?

q1 q2 q3 q4 q5

4. Are you planning on playing hockey next year?

q Yes q No

5. Did you feel your playing time was fair?

q1 q2 q3 q4 q5

6. Did you think that you had enough opportunity to ask questions?

q1 q2 q3 q4 q5

### Section Three – Parent Section

---

*Please note - 1 = lowest rating, 5 = the highest rating*

To be answered by the Parent:

1. Did your child enjoy the hockey experience?  
q 1   q 2   q 3   q 4   q 5
2. Do you feel that your child became a better hockey player?  
q 1   q 2   q 3   q 4   q 5
3. Did you child gain a better perspective of teamwork?  
q 1   q 2   q 3   q 4   q 5
4. Did hockey help your child's self-confidence?  
q 1   q 2   q 3   q 4   q 5
5. Was the coach's public conduct at games acceptable?  
q 1   q 2   q 3   q 4   q 5
6. Do you feel that you child was treated with respect?  
q 1   q 2   q 3   q 4   q 5
7. How would you rate the coach's organization skills?  
q 1   q 2   q 3   q 4   q 5
8. How would you rate the coach's communication with parents?  
q 1   q 2   q 3   q 4   q 5
9. Was the coach positive and enthusiastic?  
q 1   q 2   q 3   q 4   q 5
10. Practices were motivating, productive and well planned?  
q 1   q 2   q 3   q 4   q 5
11. I wouldlike to see the coach return next year?  
q 1   q 2   q 3   q 4   q 5
12. OPTIONAL – Please suggest changes that you would like to see in the program.

**Section Four – General Comments / Supporting Documents Optional**

---

Use this section to make any general comments and/or supporting documentation not listed above.

1. General comments:

Parent Name (Optional):

Thank you again for making the time and completing this survey.

You can email this survey directly to myself, or drop a copy of this off at the CMHA mail box that is located inside of each arena mail entrance.

Sincerely,



David Hearn  
President  
Collingwood Minor Hockey Association