



EVALUATION FORM

Corner Community Park is committed to providing high-quality programs for the children of our community. It is essential that we understand how we can improve. We ask that you give us your candid assessment and also provide ideas for how we might be more effective. As you complete the form, please know that your responses can be confidential. You are not required to give your name or your child's name in order to submit your evaluation form. Thank you for taking the time to share your feedback.

Sport: _____

Year: _____

Coach: _____

Very Satisfied \longrightarrow Not Satisfied

5 4 3 2 1

The overall performance of our head coach.

5 4 3 2 1

The overall performance of our assistant coach(es).

5 4 3 2 1

The structure and organization of this sport.

5 4 3 2 1

The structure and organization of Corner Community Park.

Strongly Agree \longrightarrow Do Not Agree

5 4 3 2 1

My child enjoyed his/her participation in this sport.

5 4 3 2 1

My child grew his/her knowledge of this sport.

5 4 3 2 1

I would allow my child to play for this coach again.

5 4 3 2 1

I believe that my child was treated fairly.

Please comment on any of the items listed above:

What ideas for improvement would you like to share with our Park's commissioners or board members?
